

Agenda Item: 20/21-249

Board of Directors
3rd March 2021

Title:	Monthly Safe Nurse Staffing Report
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Executive Summary

The safe nurse staffing dashboard provides an oversight of areas related to the provision of nurse staffing, both RN and CSW. Month 10 saw a significant increase in the number of RN and CSW shifts required to safely staff wards due to increasing acuity and dependency, coupled with the need to staff 11 red wards which brings an added work pressure because of the level of PPE required. Sickness was also the highest level since M4.

To maximize the fill rate the nurse incentive scheme was revised so staff could book a single shift at a time. This improved uptake and reduced unfilled shifts; the Trust has also block booked a number of agency RNs to support safe staffing levels in the Emergency Department , Critical Care , General Surgical and Elderly Medicine Wards.

The Trust has continued to use the Winter Staffing Escalation Plan to ensure deployment of senior nursing and non-ward based nursing staff to work clinically. The Trust also remains on track with the International Recruitment Programme to support the recruitment of up to 100 international nurses before end of April 2021. The first cohort of 14 nurses arrives from India on 24 February 2021, they are expected to be working on the wards as RNs in April 2021 following successful completion of the Objective Structured Clinical Examinations (OSCE).

Recommendation:

(e.g. to note, approve, endorse)

To note

Which strategic objectives this report provides information about:

Outstanding Care: provide the best care and support	Yes
Compassionate workforce: be a great place to work	Yes
Continuous Improvement: Maximise our potential to improve and deliver best value	Yes / No

Our partners: provide seamless care working with our partners	Yes / No
Digital future: be a digital pioneer and centre for excellence	Yes / No
Infrastructure: improve our infrastructure and how we use it.	Yes / No

Please provide details of the risks associated with the subject of this paper, including new risks (x-reference to the Board Assurance Framework and significant risk register)	
BAF references 1,2,4,6.	
Nurse Staffing is scored as 16 within Medicine and Acute	
Positives.	
<ul style="list-style-type: none"> The Trust has robust systems and processes in place to flex and monitor nurse staffing to meet the demands of the organisation and patient requirements. Despite the demand for registered nurse (RN) hours increasing from 28638 to 42759 hours per month the Trust has maintained NHSP fill rates at 57% through the use of the nurse incentive scheme. 100 international nurses that are expected to arrive in the Trust before the end of April 2021 	
Gaps.	
<ul style="list-style-type: none"> The Trust has seen an increase in the use of agency nurses utilised to fill RN staffing gaps to 2.30% The Trust has seen an increase in RN sickness rates to above 9 % and CSW sickness to above 12 % (M10). 	
Regulatory and legal implications (e.g. NHSI segmentation ratings, CQC essential standards, competition law)	
NHSI – developing Workforce Safeguards , CQC Essential Standards	
Financial implications / impact (e.g. CIPs, revenue/capital, year-end forecast)	
Nursing expenditure	
Specific communications and stakeholder /staff engagement implications	
Stakeholder confidence	
Patient / staff implications (e.g. links to the NHS Constitution, equality & diversity)	
NMC Code , NHS Constitution, NHS People Plan	
Council of Governors implications / impact (e.g. links to Governors statutory role, significant transactions)	
NA	
Previous considerations by the Board / Board sub-committees	Monthly safe nurse staffing report to Board since October 2020
Background papers / supporting information	NA

BOARD OF DIRECTORS MEETING IN PUBLIC
3rd March 2020

Monthly Safe Staffing Report

Purpose

This report provides the Board of Directors with information, assurances and risks associated with the safety of nurse staffing within the Trust.

1 Current position: areas to note

1.1 Vacancies

Due to a technical fault in ESR it transpired that data reported for M8 and M9 was incorrect. This has now been revised (noted blue on the dashboard Appendix 1). RN vacancies rates have steadily increased since M6 (16.9%) to M10 (19.42%).

1.2 Sickness

RN and CSW sickness are noted to be at the highest level seen since M4, reported at 9.17% RN and 12.34% CSW in M10.

1.3 Safe Staffing Oversight Tracker (SSOT) review

During M10 the SSOT recorded 689 shifts that fell below minimum staffing levels for RNs; this is a significant increase from the 499 red shifts recorded in M9. There were no shifts in red when assessed using professional judgement, as appropriate controls or mitigations were put in place.

1.4 Impact on Care

A retrospective review is undertaken of all shifts that fall below minimum staffing levels to identify any potential or actual harms that may have occurred. These are recorded on the SSOT and compared to Trust incident data.

Key areas to note for M10 are:

- Increased number of falls (26 compared to 19 in M9)
- Increase in the number of shifts where staff missed breaks (119 from 107 in M9)

- Reduction in reported medication errors (2 compared to 27 in M9)
- Reduction in number of times patients had delayed pressure area care (46 from 145 in M9)

Incident reports are being reviewed for triangulation to identify any potential harm as a result of reduced staffing levels.

1.5 Recorded incidents relating to safe staffing for nursing

There was an increase in reported incidents during M10 with a total of 102. These are currently under review to identify themes such as staff moves, missed breaks or lower staffing numbers.

2. Actions to mitigate risks

The Corporate Nursing Team continues to monitor standards of safety and quality using the mini WISE/ spot check programme. The outcomes of reviews will be reported to Patient Safety Quality Board in March 2021. This is in addition to the existing assurance mechanisms.

During Q3 the Trust purchased and implemented updated falls prevention technology; Rambleguard mats and electronic sensor devices for bathroom. Focused work has taken place in wards with higher numbers of falls. Reducing falls overall and those resulting in harm, will be a priority for the Quality Improvement team.

Nurse staffing meetings continue at a minimum of 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. The Trust has continued to use the Winter Staffing Escalation Plan to ensure deployment of senior nursing and non-ward based staff to work clinically.

The Trust remains on track with the International Recruitment Programme to support the recruitment of up to 100 international nurses before end of April 2021. The first cohort of 14 nurses arrives from India on 24 February 2021, they are expected to be working on the wards as RNs in April 2021 following successful completion of the Objective Structured Clinical Examinations (OSCE). Further cohorts are due to arrive in March, April and May.

Cohort	Arrival	OSCE date	Wards
1+2 (21 Nurses)	WC 22/ 28 Feb (TBC) and 8 March	13/14/28th April	End April / May
Cohort 3, 4 , 5 ,6 (total 87 nurses)	WC 18 March (cohorts 3 and 4) WC 20 April (cohorts 5 and 6)	14-18 th June	End June
Strand B (28 nurses)	End May	July / August	July /August

The Trust is part of the national recruitment programme for CSWs. We are aiming to reduce vacancies to zero during Q1 2021/22.

3. Establishment reviews

The Trust is required to undertake a six monthly acuity and dependency study to support establishment reviews, as outlined in the NHS Improvement (NHSI) Developing Workforce Safeguards document (2018).

Due to the ongoing instability of wards and the imminent impact of the reset and recovery programme in Q1 it is recommended the Trust does not undertake the acuity and dependency study in March. The senior nurses will continue to use professional judgement to manage the fluctuating demands of staffing until the effects of the COVID-19 pandemic have reduced and the impact of the additional 100 international nurses can be seen. The previous study in Summer 2020 yielded unreliable data owing to the arrangements for managing the pandemic. It is likely that the next study will be undertaken during late Summer 2021.

4. Conclusions

M10 has been challenging for nurse staffing due to high sickness, vacancies and the implications of COVID-19 on clinical practice. The review of staffing incidents will reveal any additional impact to those already detailed within and will be reported next month. The flexibility introduced for the nurse incentive scheme has mitigated many risks by supporting better fill rates.

The high vacancy rate should reduce into the new financial year when the 100 plus international nurses and additional CSWs start in the Trust.

5. Recommendations to the Board

The Board of Directors are requested to note the contents of report and to support the decision to undertake one acuity and dependency study at the end of Q2 in anticipation of a full nurse staffing establishment review in early Q3 that will inform the Winter Nurse staffing plans for 2021/22.

Appendix 1

Safe Staffing Assurance Dashboard July to January 20/21

Safe Staffing Board Assurance Dashboard 2020									
Data Source	Indicator	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Spark line
Corporate Nursing	Care Hours Per Patient Day - Total		9.6	8	8.5	10.1	9.5	8.1	
Corporate Nursing	Care Hours Per Patient Day - Registered Nurses		4.8	3.8	4.1	5.2	4.8	4	
Corporate Nursing	Care Hours Per Patient Day - CSW's		4.2	3.5	3.7	4.1	3.8	3.4	
Corporate Nursing	National Fill rates RN Day		79%	76%	83%	84%	85%	79%	
Corporate Nursing	National Fill rates CSW Day		76%	86%	89%	94%	88%	86%	
Corporate Nursing	National Fill rates RN Nights		94%	72%	79%	81%	82%	77%	
Corporate Nursing	National Fill rates CSW Nights		97%	90%	104%	100%	99%	95%	
Corporate Nursing	Trust Occupancy Rate	57.20%	66.90%	79.50%	79.50%	76.10%	79.30%	83.50%	
Corporate Nursing	Occupancy Rate - APH	63.10%	72.10%	81.50%	79.10%	76.00%	80.30%	82.30%	
Corporate Nursing	Occupancy Rate - CBH	16.00%	24.90%	51.90%	46.10%	39.00%	37.90%	50%	
Workforce	Vacancy Rate (Band 5 RN's)	18.46%	18.05%	16.94%	16.61%	17.66%	18.10%	19.42%	
Workforce	Vacancy rate (Band 5 inpatient wards)	20.57%	20.16%	18.73%	17.11%	17.72%	18.49%	19.89%	
Workforce	Vacancy Rate - All RN (All grades)	9.81%	9.90%	9.40%	8.67%	9.79%	9.57%	10.79%	
Workforce	Vacancy Rate (csw's)	5.89%	5.86%	7.86%	7.77%	8.11%	6.28%	6.79%	
Workforce	Sickness Rate - RN	5.69%	6.12%	6.38%	6.80%	6.95%	6.49%	9.17%	
Workforce	Sickness Rate - CSW	10.46%	9.58%	10.09%	8.82%	7.59%	8.18%	12.34%	
Workforce	Absences Rate - RN	4.84%	2.36%	2.60%	1.55%	1.76%	1.50%	2.39%	
Workforce	Absences Rate- CSW	4.96%	3.33%	3.17%	1.55%	2.17%	1.56%	2.64%	
Corporate Nursing	Number of Professional Judgment Red Shifts		1	0	0	0	0	0	
Corporate Nursing	Number of RN Red Shifts		359	445	454	243	499	689	
Corporate Nursing	RN Red Shift Impact : Number of Falls		7	9	17	4	19	26	
Corporate Nursing	RN Red Shift Impact : Number of Falls with Harm		0	1	1	0	0	0	
Corporate Nursing	RN Red Impact : Meds Errors / Misses		3	0	7	1	27	2	
Corporate Nursing	RN Red Impact : Patient relative complaints		2	0	3	0	0	1	
Corporate Nursing	RN Red Impact : Staffing incident submitted		6	16	18	7	23	33	
Corporate Nursing	RN Red Impact : Special 1:1 (uncovered)		3	7	9	0	26	38	
Corporate Nursing	RN Red Impact: Missed Breaks		14	26	26	10	107	119	
Corporate Nursing	RN Red Impact: Delayed / Missed Obs		10	19	122	1	287	278	
Corporate Nursing	RN Red Impact: Delayed / Missed nMEWS		12	33	12	31	239	237	
Corporate Nursing	RN Red Impact: Delayed / Missed Pressure Care		3	14	24	23	145	46	
Corporate Nursing	RN Red Impact : Delayed Meds		8	20	127	6	582	299	
Governance support	Number of SI's where staffing has been a contributing factor	0	0	0	0	0	1	1	
Corporate Nursing	Total Number of staffing incidents	30	53	80	75	25	90	102	
Complaints team	Formal complaints in relation to staffing issues	0	0	0	0	1	0	0	
Complaints team	Informal Concerns raising staffing levels as an issue	0	0	0	1	0	0	1	
Complaints team	Patient Experience feedback raising staffing levels as a concern	0	0	0	0	0	0	0	
Corporate Nursing	Staff Moves		232	329	140	164	172	TBC	
NHS Professional	Number of RN hours requested	19909	22878	24734	28432	31103	28638	43952	
NHS Professional	Number of CSW hours requested	20155	25196	25007	32505	28386	30651	42759	
NHS Professionals	% of requested filled RN's	67.80%	62.80%	61.70%	60.20%	72.70%	58.90%	57.50%	
NHS Professionals	% of requested CSW filled	86.30%	80.20%	76.50%	71.10%	85.30%	68.10%	62.80%	
NHS Professionals	% of Agency staff used RN	3%	3%	3%	2%	6%	1%	2.30%	
NHS Professionals	% of Agency staff used CSW	0	0	0	0	0%	0%	0%	