

Board of Directors (Public)

Item 3.1

Subject: LHCH Monthly Staffing for Reporting Period for November and December 2015

Prepared by: Divisional Heads of Nursing and Quality for Surgery, Medicine and Clinical Services

Presented by: Sue Pemberton, Executive Director of Nursing and Quality

BAF Ref	Impact on BAF Risk Rating?
1, 2	None

1.0 Executive Summary

From June 2014, NHS England has stipulated that all Trusts with inpatient beds are required on a monthly basis to publish their staffing levels (planned versus actual) in hours on the NHS Choices website. In addition, Trusts are required to publish this data on their own website, on an individual ward basis. This information sits alongside a range of other indicators related to staffing within the Trust e.g. date of last fall/ pressure ulcer etc.

It is also a requirement of NHS England for Trusts to present staffing information on a monthly basis to the Board of Directors to ensure they are appraised of staffing within the organisation in line with national directives. LHCH highlights this information on each ward to the public. In addition, this information is displayed on electronic boards at the entrance of each ward which is updated for each shift.

At LHCH, information relating to staffing establishments, patient safety issues, occupancy etc., has been presented 6-monthly for the last 4 years, undergoing scrutiny by the Heads of Nursing. A report has been presented in July 2015 to the Quality Committee and Divisional Governance Committees by the Heads of Nursing. From January 2016 red flags will be reported and data regarding missed breaks will be included. This report details planned and actual nurse staffing levels for the month of December 2015.

The main variance in Cardiology Division for November was for Birch ward with HCAs working 24.4% less shifts than planned. This was due to sickness and the ward manager and nurse in charge managed the processes within team working to ensure safety and quality care for patients. Maple Suite also had reduced numbers of non-registered staff compared to what was planned and this was due to a member of the team working to support another ward. The trained staff were utilised to support skill mix requirements.

The main variance to note for Surgery Division has been on Cedar ward with a 14.4% increase compared to planned, for the day shift, of non-registered staff which is due to new starters who are awaiting their PIN. These staff are temporarily included in the non-registered workforce report. On Elm Ward there was an increase in the amount of non-registered staff of 70% and this was to support patients who have had strokes/are paraplegic and require extra support to ensure their safety and wellbeing. This in real terms equates to one extra HCA on a night shift.

Oak Ward similarly have had extra HCA staff working during the day and night (@28%) due to staff awaiting their PIN and to support patient care.

All shifts were reported as safe during November and December.

2.0 Staffing Report

The information demonstrates the staffing information per ward and details planned staffing versus actual, stating which shifts have not met their staffing ratio and reasons for this. Where staffing compliance is not at 100%, the paper details the reasons why and the action taken to address the shortfall. On a daily basis, professional judgement is used to ensure that the wards have the appropriate staff and skill mix in place to ensure that safe quality care is delivered to patients and their families. Any risks are managed and escalated to the Heads of Nursing and discussed at the safety huddle with the Chief Executive.

3.0 Summary

In summary, the wards are safe and staff is managed and reviewed on a shift by shift basis. Where dependent patients are identified, extra staff are brought in to support them. Further discussions are also held at the daily safety huddle in the CEO office daily at 9.30am.

A letter from Monitor, NHS England, CQC, NICE and TDA to Trusts (dated 13th October 2015) has highlighted that safer staffing should be viewed from a multi-disciplinary basis as opposed to nursing alone. This is being considered within LHCH currently and work is underway to trial a new model of multi-disciplinary working from January 2016 on Elm ward involving the therapy teams.

The paper has identified several themes, which are currently being actioned:-

- Regular daily discussions between the ward managers and Heads of Nursing to examine staffing and the results of each paper.
- Close inter-directorate team working to enable quick flexible response to unpredictable events such as last minute sickness, increase in patients undergoing Primary PCI, increased acuity/dependency of surgical post-operative patients and cancelling of bank staff, etc.
- On-going corporate approach to nursing recruitment is in place.

4.0 Recommendations

The Board of Directors are requested to:

- Receive assurance related to nurse staffing for in-patient wards, as per national directives, noting actions being taken to ensure patient safety and quality of care is maintained.
- Receive assurance that staffing is appropriate and is flexed according to patient need and patient safety risk assessments, following escalation processes.
- Receive monthly reports of staffing at all planned board meetings.

Appendix 1 – data split by month and ward / department#

November Data

Cherry Ward

Staff requirements on each shift: split into RN (Registered nurse), AP (Assistant Practitioner) and HCA (Healthcare Assistant)

	Early shift	Late shift	Night shift
Monday - Friday	2RN1AP 1HCA	2RN 1AP 1HCA	2RN 1HCA
Saturday /Sunday	2RN 1HCA	2RN 1HCA	2RN 1HCA

	Compliance with planned staffing %	Variance to planned staffing %	Comments/Actions
RN Day shifts	100	0	The Ward Manager has worked several shifts to cover sickness/ leave and nursing staff from Maple have supported Cherry ward when required. Occupancy has been low for some shifts. A staffing review is being undertaken due to reducing bed numbers. All shifts have been safe.
RN Night shifts	96.7	-3.3	
HCA / AP Day shifts	83.3	-16.7	
HCA / AP Night shifts	100	0	

Birch Ward:

Staff requirements on each shift:

	Early shift	Late shift	Night shift
Monday - Friday	9RN 1AP 4HCA	7RN 1AP 3HCA	4RN 2HCA
Saturday /Sunday	7RN 3HCA	6RN 3HCA	4RN 2HCA

	Compliance with planned staffing %	Variance to planned staffing %	Comments/ Actions
RN Day shifts	99.1	-0.9	Where required the Ward Manager has worked shifts to cover sickness. Staff have been moved where occupancy and acuity have allowed to support other areas and the ward has had support from other wards on occasions. All shifts have been safe.
RN Night shifts	99.3	-0.7	
HCA / AP Day shifts	75.6	-24.4	
HCA / AP Night shifts	100	0	

Maple Suite:

Staff requirements on each shift:

	Early shift	Late shift	Night shift
Monday - Friday	3RN 1AP 1HCA	2RN 1AP 1HCA	2RN 1HCA
Saturday /Sunday	2RN 1AP 1HCA	2RN 1AP 1HCA	2RN 1HCA

	Compliance with planned staffing %	Variance to planned staffing %	Comments/Actions
RN Day shifts	117.8	+17.8	The extra RNs have been utilised to support skill-mix requirements. An AP has temporarily been relocated to support Cedar ward. All shifts are reported as safe.
RN Night shifts	100	0	
HCA / AP Day shifts	68.3	-31.7	
HCA/ AP Night shifts	97.3	-2.7	

Coronary Care Unit:

Staff requirements on each shift:

	Early shift	Late shift	Night shift
Monday - Sunday	7RN 1AP 1HCA	7RN 1HCA	7RN 1HCA

	Compliance with planned staffing %	Variance to planned staffing %	Comments/Actions
RN Day shifts	86.2	-13.8	Where required and when occupancy and acuity has allowed, the Nurse in Charge has also monitored the telemetry system. The Head of Nursing is supporting the new manager to ensure shifts are safe. Staff have been moved when acuity and dependency have allowed and also the unit has benefited from support from agency and staff from other areas. All shifts are reported as being safe.
RN Night shifts	88.1	-11.9	
HCA / AP Day shifts	97.5	-2.5	
HCA / AP Night shifts	80	-20	

Cedar Ward

Staff requirements on each shift:

Day	Early	Late	Night
Mon - Fri	6RN and 3HCA	5RN and 3HCA	4RN and 3HCA
Sat –Sun	6RN and 3HCA	5RN and 3HCA	4RN and 3HCA

	Compliance with planned staffing %	Variance to planned staffing %	Comments/Actions
RN Day shifts	85.8	-14.2	The gaps in RN are due to some vacancies and new starters who are awaiting their PIN (hence a HCA increase is noted). Assistant practitioners have been utilised where appropriate and the Ward Manager has worked in the numbers where required. All shifts are reported to be safe.
RN Night shifts	95	-5	
HCA / AP Day shifts	114.4	+14.4	
HCA / AP Night shifts	77.8	-22.2	

Elm Ward

Staff requirements on each shift:

	Early shift	Late shift	Night shift
Monday - Sunday	5 RN and 3 HCA	4 RN and 3 HCA	3 RN and 1 HCA

	Compliance with planned staffing %	Variance to planned staffing %	Comments/Actions
RN Day shifts	97.6	-2.4	There has been an increased need to use extra HCA staff to support patients who have had strokes / are paraplegic and require extra support to ensure their safety and wellbeing. All other shifts are reported as safe. Whilst this appears to be lots of staff, it equates to 1 extra HCA on a night shift. All shifts are reported to be safe.
RN Night shifts	100	0	
HCA / AP Day shifts	106.5	+6.5	
HCA / AP Night shifts	170	+70	

HDU

Staff requirements on each shift:

	Early shift	Late shift	Night shift
Monday - Friday	2	2	2
Saturday - Sunday	2	2	2

	Compliance with planned staffing %	Variance to planned staffing %	Comments/Actions
RN Day shifts	100	0	HCAs / ICAs have been used to support on an ad hoc basis. This is being reviewed by the Head of Nursing. All shifts are reported as safe.
RN Night shifts	100	0	
HCA / AP Day shifts			
HCA / AP Night shifts			

Oak Ward

Staff requirements on each shift:

	Early shift	Late shift	Night shift
Monday - Sunday	4 RN and 3 HCA	4 RN and 2 HCA	3 RN and 2 HCA

	Compliance with planned staffing %	Variance to planned staffing %	Comments/Actions
RN Day shifts	97.3	-2.7	The gaps in RN are due to vacancies and new starters who are awaiting their PIN (hence a HCA increase is noted). Some extra HCAs have been utilised to support patients requiring further support due to confusion. Staffing has been deemed as safe.
RN Night shifts	94.4	-5.6	
HCA / AP Day shifts	128.7	+28.7	
HCA / AP Night shifts	128.3	+28.3	

Surgical Admissions Unit (now Mulberry Ward)

Staff requirements on each shift:

	Early shift	Late shift	Night shift
Monday - Thursday	2 RN and 1 HCA	2 RN and 1 HCA	1 RN 1 AP / 2RN
Friday	2 RN and 1 HCA	CLOSED	CLOSED
Saturday	CLOSED	CLOSED	CLOSED
Sunday	CLOSED	2RN and 2 HCA	1 RN 1 AP / 2RN

	Compliance with planned staffing %	Variance to planned staffing %	Comments/Actions
RN Day shifts	100	0	Staffing has been deemed as safe.
RN Night shifts	100	0	
HCA / AP Day shifts	100	0	
HCA / AP Night shifts	100	0	

SICU

Staff requirements on each shift:

	Compliance %	Variance %	Comments/Actions
RN Day shifts	99.1	-0.9	This information is assessed on a shift basis and staffing appropriate for patient care. Staffing has reflected the levels of care required within POCCU / ITU. Staffing has been deemed as safe for each shift.
RN Night shifts	98.3	-1.7	
HCA / AP Day shifts	98	-2	
HCA / AP Night shifts	80.5	-19.5	

December Data**Cherry Ward**

Staff requirements on each shift: split into RN (Registered nurse), AP (Assistant Practitioner) and HCA (Healthcare Assistant)

	Early shift	Late shift	Night shift
Monday - Friday	2RN1AP 1HCA	2RN 1AP 1HCA	2RN 1HCA
Saturday /Sunday	2RN 1HCA	2RN 1HCA	2RN 1HCA

	Compliance with planned staffing %	Variance to planned staffing %	Comments/Actions
RN Day shifts	101.9	+1.9	The Ward Manager has worked several shifts to cover sickness/ leave and nursing staff from Maple have supported Cherry ward when required. The planned staffing was reduced for this month due to the planned closure of the ward from 24 th December due to reduced occupancy. Occupancy has been low for some shifts. All shifts have been safe.
RN Night shifts	97.9	-2.1	
HCA / AP Day shifts	69	-31	
HCA / AP Night shifts	95.8	-4.2	

Birch Ward:

Staff requirements on each shift:

	Early shift	Late shift	Night shift
Monday - Friday	7RN 1AP 4HCA	7RN 4HCA	4RN 2HCA
Saturday /Sunday	7RN 3HCA	6RN 3HCA	4RN 2HCA

	Compliance with planned staffing %	Variance to planned staffing %	Comments/ Actions
RN Day shifts	90.9	-9.1	Where required the Ward Manager has worked shifts to cover sickness. Staff have shared their workload across teams to support patient care. . Support has been
RN Night shifts	91.9	-8.1	
HCA / AP Day shifts	83.5	-16.5	
HCA / AP Night shifts	103.2	+3.2	

			given from other areas to assist with high acuity at times. All shifts have been reported as safe.
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Maple Suite:

Staff requirements on each shift:

	Early shift	Late shift	Night shift
Monday - Friday	3RN 1AP 1HCA	2RN 1AP 1HCA	2RN 1HCA
Saturday /Sunday	2RN 1AP 1HCA	2RN 1AP 1HCA	2RN 1HCA

	Compliance with planned staffing %	Variance to planned staffing %	Comments/Actions
RN Day shifts	107.6	+7.6	RNs have been utilised to support skill-mix requirements. An AP has temporarily been relocated to support Cedar ward. All shifts are reported as safe.
RN Night shifts	100	0	
HCA / AP Day shifts	63.7	-36.3	
HCA/ AP Night shifts	71	-29	

Coronary Care Unit:

Staff requirements on each shift:

	Early shift	Late shift	Night shift
Monday - Sunday	7RN 1AP 1HCA	7RN 1HCA	7RN 1HCA

	Compliance with planned staffing %	Variance to planned staffing %	Comments/Actions
RN Day shifts	93.1	6.90	Where required and when occupancy and acuity has allowed, the Nurse in Charge has also monitored the telemetry system. All shifts are reported as safe.
RN Night shifts	92.6	-7.4	
HCA / AP Day shifts	123.5	+23.5	
HCA / AP Night shifts	100	0	

Cedar Ward

Staff requirements on each shift:

Day	Early	Late	Night
Mon - Fri	6RN and 3HCA	5RN and 3HCA	4RN and 3HCA
Sat –Sun	6RN and 3HCA	5RN and 3HCA	4RN and 3HCA

	Compliance with planned staffing %	Variance to planned staffing %	Comments/Actions
RN Day shifts	76	-24	The gaps in RN are due to some vacancies and due to the occupancy being reduced over the festive season. Assistant practitioners have been utilised where appropriate. All shifts are reported as safe.
RN Night shifts	83.9	-16.1	
HCA / AP Day shifts	94.1	-5.9	
HCA / AP Night shifts	80.6	-19.4	

Elm Ward

Staff requirements on each shift:

	Early shift	Late shift	Night shift
Monday - Sunday	5 RN and 3 HCA	4 RN and 3 HCA	3 RN and 1 HCA

	Compliance with planned staffing %	Variance to planned staffing %	Comments/Actions
RN Day shifts	92.7	-7.3	There has been an increased need to use extra HCA staff to support patients who have had strokes / are agitated and require extra support to ensure their safety and wellbeing. Whilst this increase appears high, it equates to 1 extra HCA on some night shifts. All shifts are reported as safe.
RN Night shifts	102.2	+2.2	
HCA / AP Day shifts	109.7	+9.7	
HCA / AP Night shifts	148.4	+48.4	

HDU

Staff requirements on each shift:

	Early shift	Late shift	Night shift
Monday - Friday	2RN +1 SW	2RN +1 SW	2RN +1SW
Saturday - Sunday	2RN + 1 SW	2RN + 1SW	2RN +1 SW

	Compliance with planned staffing %	Variance to planned staffing %	Comments/Actions
RN Day shifts	100	0	Staffing review has been completed and a revised establishment agreed as 2 RN + 1 Support Worker each shift. The requirement is variable dependent on activity. All shifts are reported as safe. There have been shifts where HDU capacity was increased to 6 patients. This was safely covered by the required staff on all occasions
RN Night shifts	100	0	
HCA / AP Day shifts	100	0	
HCA / AP Night shifts	100	0	

Oak Ward

Staff requirements on each shift:

	Early shift	Late shift	Night shift
Monday - Sunday	4 RN and 3 HCA	4 RN and 2 HCA	3 RN and 2 HCA

	Compliance with planned staffing %	Variance to planned staffing %	Comments/Actions
RN Day shifts	93.3	-6.7	The gaps in RN are due to vacancies and awaiting new staff to start in post. Some extra HCAs have been utilised to support patients requiring further support due to confusion / risk of falls. All shifts are reported as safe.
RN Night shifts	94.9	-5.1	
HCA / AP Day shifts	137.9	+37.9	
HCA / AP Night shifts	129	+29	

Mulberry Ward (formerly Surgical Admissions Unit)

Staff requirements on each shift:

	Early shift	Late shift	Night shift
Monday - Thursday	2 RN and 1 HCA	2 RN and 1 HCA	1 RN 1 AP / 2RN
Friday	2 RN and 1 HCA	CLOSED	CLOSED
Saturday	CLOSED	CLOSED	CLOSED
Sunday	CLOSED	2RN and 2 HCA	1 RN 1 AP / 2RN

	Compliance with planned staffing %	Variance to planned staffing %	Comments/Actions
RN Day shifts	100	0	Further work is being undertaken this month to review staffing in this area to comply with national guidance to have 2 RNs on a shift. All shifts have been reported as safe.
RN Night shifts	100	0	
HCA / AP Day shifts	100	0	
HCA / AP Night shifts	100	0	

SICU

Staff requirements on each shift:

	Compliance %	Variance %	Comments/Actions
RN Day shifts	98.2%	-1.8	This information is assessed on a shift basis and staffing appropriate for patient care. Staffing has reflected the levels of care required within POCCU / ITU. The SW resource is shared between SICU and HDU and is assessed on a shift by shift basis. All shifts have been reported as safe.
RN Night shifts	97.6%	-2.4	
HCA / AP Day shifts	65.6%	-34.4	
HCA / AP Night shifts	89.7	-10.3	

November 2015

Only complete sites your organisation is accountable for			Day				Night				Day		Night	
Ward name	Main 2 Specialties on each ward		Registered midwives/nurses		Care Staff		Registered midwives/nurses		Care Staff		Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)
	Specialty 1	Specialty 2	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours				
CHERRY WARD	320 - CARDIOLOGY	340 - RESPIRATORY MEDICINE	967.5	967.5	765	637.5	562.5	543.75	281.25	281.25	100.0%	83.3%	96.7%	100.0%
BIRCH WARD (WARD A)	320 - CARDIOLOGY	340 - RESPIRATORY MEDICINE	3397	3367	1507.5	1139	1125	1117	562.5	562.5	99.1%	75.6%	99.3%	100.0%
CEDAR WARD (WARD C)	170 - CARDIOTHORACIC SURGERY		2632.5	2257.5	1350	1545	1125	1068.75	843.75	656.25	85.8%	114.4%	95.0%	77.8%
CORONARY CARE UNIT	170 - CARDIOTHORACIC SURGERY		3120	2690	607.5	592.5	2100	1850	300	240	86.2%	97.5%	88.1%	80.0%
CRITICAL CARE AREA	170 - CARDIOTHORACIC SURGERY		13650	13522.5	2250	2205	9821.73	9656	1600.5	1288.14	99.1%	98.0%	98.3%	80.5%
ELM WARD (WARD E)	170 - CARDIOTHORACIC SURGERY		2182.5	2130	1507.5	1605	843.75	843.75	281.25	478.12	97.6%	106.5%	100.0%	170.0%
OAK WARD (WARD G)	170 - CARDIOTHORACIC SURGERY		1957.5	1905	1125	1447.5	843.75	796.87	562.5	721.87	97.3%	128.7%	94.4%	128.3%
SURGICAL ADMISSIONS UNIT	170 - CARDIOTHORACIC SURGERY		547.5	547.5	352.5	352.5	253.12	253.12	159.29	159.29	100.0%	100.0%	100.0%	100.0%
THORACIC "HDU"	170 - CARDIOTHORACIC SURGERY		765	765	450	292.5	459.37	459.37	225	215.62	100.0%	65.0%	100.0%	95.8%
MAPLE SUITE (AL1)	320 - CARDIOLOGY	170 - CARDIOTHORACIC SURGERY	967.5	1139.5	900	615	562.5	562.5	281.25	273.75	117.8%	68.3%	100.0%	97.3%

December 2015

Only complete sites your organisation is accountable for			Day				Night				Day		Night	
Ward name	Main 2 Specialties on each ward		Registered midwives/nurses		Care Staff		Registered midwives/nurses		Care Staff		Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)
	Specialty 1	Specialty 2	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours				
CHERRY WARD	320 - CARDIOLOGY	340 - RESPIRATORY MEDICINE	780	795	630	435	450	440.62	225	215.62	101.9%	69.0%	97.9%	95.8%
BIRCH WARD (WARD A)	320 - CARDIOLOGY	340 - RESPIRATORY MEDICINE	3367.5	3060	1912	1597	1162.5	1068.75	581.25	600	90.9%	83.5%	91.9%	103.2%
CEDAR WARD (WARD C)	170 - CARDIOTHORACIC SURGERY		2722.5	2070	1395	1312.5	1162.5	975	871.87	703.12	76.0%	94.1%	83.9%	80.6%
CORONARY CARE UNIT	170 - CARDIOTHORACIC SURGERY		3255	3030	637.5	787	2170	2010	310	310	93.1%	123.5%	92.6%	100.0%
CRITICAL CARE AREA	170 - CARDIOTHORACIC SURGERY		13297.5	13057.5	3235	2122.5	9421.6	9197.54	1653	1483.13	98.2%	65.6%	97.6%	89.7%
ELM WARD (WARD E)	170 - CARDIOTHORACIC SURGERY		2257.5	2092.5	1395	1530	871.87	890.62	290.62	431.25	92.7%	109.7%	102.2%	148.4%
OAK WARD (WARD G)	170 - CARDIOTHORACIC SURGERY		2025	1890	930	1282.5	869.55	825	581.25	750	93.3%	137.9%	94.9%	129.0%
MULBERRY WARD (SAU)	170 - CARDIOTHORACIC SURGERY		330	330	195	195	121.87	121.87	112.5	112.5	100.0%	100.0%	100.0%	100.0%
THORACIC "HDU"	170 - CARDIOTHORACIC SURGERY		690	690	262.5	262.5	412.5	412.5	159.375	159.375	100.0%	100.0%	100.0%	100.0%
MAPLE SUITE (AL1)	320 - CARDIOLOGY	170 - CARDIOTHORACIC SURGERY	990	1065	930	592.5	581.25	581.25	290.62	206.25	107.6%	63.7%	100.0%	71.0%