Safe staffing levels: April 2015 update

The Trust is committed to publishing core planned staffing numbers against what actually occurs each month.

The Trust Board reviewed and agreed the core planned staffing levels initially at its meeting in January 2014 and then again in September 2014. There were also a number of actions that were agreed in progressing the national requirements.

The following staffing reviews have taken place since the Trust Board agreed the core planned staffing levels at its meeting in January 2014:

- Charlton Lane wards core planned staffing levels were reviewed in February 2014 (and agreed at the March Governance Committee)
- Oak House in May 2014 (and agreed at the June Governance Committee)
- Hollybrook in September 2014 (and agreed at the October Governance Committee).

The reviews took place to reflect the changing needs on the wards.

This paper outlines:

- National reporting requirements and the latest data in their required format
- Local exception reporting on a ward by ward basis
- Explanations for the variance in staffing levels on particular wards
- Core planned staffing levels on a shift by shift basis

NATIONAL REPORTING OF SAFE STAFFING LEVELS

From June 2014, we have been required to report in a standardised national format on staffing levels in:

- Planned total monthly staff hours for qualified nurses and care staff.
- Actual total monthly staff hours for qualified nurses and care staff.

The December 2014 staffing information that was submitted is outlined at the end of this paper by ward.

EXCEPTION REPORTING

In line with previous Trust reporting, we have continued to collect and collate the reasons why core planned staffing levels have not been met, and the exception codes.

In April 2015:

- **96.08%** of the hours exactly complied with the planned staffing levels.
- **3.73%** of the hours during February had a lower staff skill mix than the planned staffing levels, however the staffing numbers were compliant
- **0.18%** of the hours during February had a lower number of staff on duty than the planned levels, however this met the needs of the patients on the ward at the time.

The paper includes an explanation on the wards where there are a high number of exceptions.

Ward specific information

There are shifts where the core planned staffing hours may not exactly reflect the core planned staffing levels, the main reasons are outlined below:
- Increase staff are on duty to provide one to one care for patients
- Decrease in staff, if the patient need does not require it e.g. Patients on leave, or staff supporting other wards where the need is higher.
- Often the qualified and care staff numbers may be vary but overall the staff numbers are what is required. Decisions may be made to replace a qualified nursing shift with a health care assistant who know the patients and the ward, rather than a bank nurse who may not.

Many of the vacancies have now been filled and it is anticipated that the majority of newly appointed staff will be in post by January, unfortunately due to high sickness levels and extra clinical need, there has been an increased use of bank and agency.

Also it should be noted that staff bank operate between 9am – 5pm, and therefore it is difficult to contact them when staff report sick on an early shift to request cover. Also the nursing agencies may take several hours to find someone and then they will need induction to the ward, taking staff away from direct care for a further period of time. So on the occasions when staff telephone before an early shift to state they are unwell, it is difficult to get the cover required at such short notice.

> *Learning Disability Units:*
>
> The continued staffing shortfall in the Learning Disability units is identified on the Countywide risk register. As previously reported, the two units have not consistently had 2 qualified nurses on each shift due to the service transition that is currently taking place.
>
> **Hollybrook:** The Code 1 exceptions (where the minimum staff numbers are met however the skill mix is non-compliant but met needs of patients) reduced again to 8 incidences for April from 15 in March. There were 2 Code 2 exceptions where the unit was safely managed with reduced staffing numbers.

Westridge: There were 39 Code 1 exceptions in April compared to 44 incidences in March. The Unit was safely managed with reduced qualified staff and no detrimental effect on patients.

There is a constant review of staffing requirements to ensure the service responds to patient needs. Recruitment for qualified staff during this time of change remains a challenge. As the review draws to a close the staffing required for inpatients will become apparent and the service can be stabilised.
No issues or concerns were escalated throughout April to the Director of Quality.

Gloucestershire Recovery Units:

Laurel House had 26 Code 1 exceptions and Honeybourne had 20 Code 1 exceptions during April. This is consistent with previous reports and is due to ongoing high levels of sickness and two qualified staff vacancies. The nurse in charge of the shift uses his/her professional judgement as to whether the ward is safely staffed for that shift- both in terms of numbers and skill mix. This is in line with the national Quality Board guidance on safer staffing.

Charlton Lane Hospital:

There have been minimal exceptions to the core planned staffing levels across all wards in the hospital. All three wards have had lower than normal occupancy at the beginning of the month increasing to full occupancy latterly.
All exceptions were as a result of staff sickness.

Willow Ward: There has been 1 code 1 exceptions where the skill mix was non – compliant but met the needs of the patients. The ward was considered safe and there was no harm to patients. There has been 4 code 2 exceptions where minimum staffing numbers were non-compliant but the needs of the patients were met, again the ward was considered safe and there was no harm to patients

Mulberry Ward: There has been 1 code 1 exceptions where the skill mix was non –compliant but met the needs of the patients. The ward was considered safe and there was no harm to patients. There have been 3 code 2 exceptions where minimum staffing numbers were non-compliant but the needs of the patients were met.. The ward was considered safe and there was no harm to patients.

Chestnut Ward: There have been 2 code 1 exceptions where the skill mix was non–compliant but met the needs of the patients. The ward was considered safe and there was no harm to patients. There have been 2 code 2 exceptions where minimum staffing numbers were non-compliant but the needs of the patients were met. The ward was considered safe and there was no harm to patients.

Stonebow Unit:

Mortimer Ward: No exceptions reported this month despite continued high levels of staff sickness. There has been no escalation of concerns to the Director of Quality as per the Trust escalation policy.

Jenny Lind Ward: The code 1 exceptions relate to qualified staff sickness although these particular shifts were over numbers in HCAs to support which was deemed appropriate by the nurse in charge of the shift.

Cantilupe Ward: The high number of code 1 staffing exceptions relate to qualified nurse cover at night. compared to the two qualified staff in the core planned numbers. Processes are continuing to ensure that there is compliance in the future through proposed management of change and full staff rotation. The ward currently manages the patients' needs well with this staffing configuration however.

Oak House: Minimal exceptions related to staff sickness with no impact on patient care.

Wotton Lawn Hospital:

Abbey Ward: A slight increase in exceptions due to sickness absence, however the staffing levels have met the needs of the service during those few occasions.

Priory Ward: Despite several Code 1 exceptions during the month there was no reported impact on care delivery and safety. There were no concerns escalated with the Director of Quality.
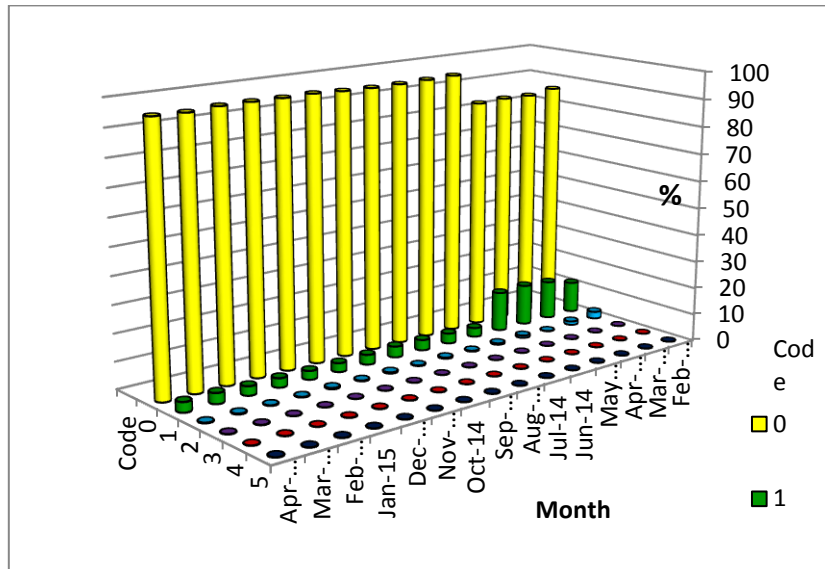
Greyfriars Unit: There continues to be a number of code 1 exceptions throughout the month. This is owing to one 1 WTE vacancy which has now been recruited to and two qualified nurses are currently working on a supernumerary basis owing to pregnancy risk factors

Montpellier Unit: No increase from last month regarding staffing exceptions with no impact on patient care or safety reported or escalated to the Director of Quality.

Dean Ward: The exception has seen a slight increase where the core planned staffing has not been met due to staff sickness absence; however the staffing levels have met the needs of the service users during those few occasions.

Kingsholm Ward has a full staff compliment and the seven shift exceptions were due to last minute sickness, however, the needs of the service user where met.

April 2015

Month by month comparison of compliance with staffing levels

The table below provides a monthly comparison of staffing level compliance.

Shifts matching core planned levels	0
Minimum staff numbers met – skill mix non-compliant but met needs of patients	1
Minimum staff numbers not compliant but met needs of patients e.g. low bed occupancy , patients on leave	2
Minimum staff numbers met – skill mix non-compliant and did not meet needs of patients	3
Minimum staff numbers not compliant and did not meet needs of patients	4
Other	5

Exception Reporting by Shift

Five exception reporting categories have been developed and these are outlined below – if there is no exception then the core planned hours by shift would be fully compliant with the planned staffing levels.

Code	Exception explanation
1	Minimum staff numbers met – skill mix non-compliant but met needs of patients
2	Minimum staff numbers not compliant but met needs of patients e.g. low bed occupancy , patients on leave
3	Minimum staff numbers met – skill mix non-compliant and did not meet needs of patients
4	Minimum staff numbers not compliant and did not meet needs of patients
5	Minimum staffing nos and skill mix not met. Resulting in clinical incident / harm to patient or other

Ward	Bed number	Number of required staff hours in the month	Exception Code 1 Minimum staff numbers met – skill mix non-compliant but met needs of patients	Exception Code 2 Minimum staff numbers not compliant but met needs of patients	Exception Code 3 Minimum staff numbers met – skill mix non-compliant and did not meet needs of patients	Exception Code 4 Minimum staff numbers not compliant and did not meet needs of patients	Exception Code 5 Minimum staffing nos and skill mix not met. Resulting in clinical incident / harm to patient or other
Gloucestershire							
Dean	14	3150 monthly hours	145	0	0	0	0
Abbey	18	3150 monthly hours	105	0	0	0	0
Priory	22	3150 monthly hours	227.5	0	0	0	0
Kingsholm	15	3150 monthly hours	32.5	0	0	0	0
Montpellier	12	3450 monthly hours	115	0	0	0	0
Greyfriars	10	3900 monthly hours	292.5	15	0	0	0
Willow	16	4350 monthly hours	7.5	22.5	0	0	0
Chestnut	14	2925 monthly hours	15	15	0	0	0
Mulberry	18	3165 monthly hours	7.5	15	7.5	0	0
Laurel	13	1950 monthly hours	195	0	0	0	0
Honeybourne	10	1950 monthly hours	150	0	0	0	0
Westridge	8	3157.5 monthly hours	292.5	0	0	0	0
Hollybrook	8	5400 monthly hours	60	0	0	0	0
Mortimer	21	3069 monthly hours	0	0	0	0	0
Jenny Lind	8	1705 monthly hours	90	0	0	0	0
Cantilupe	10	2867.50 monthly hours	187	0	0	0	0
Oak House	10	1705 monthly hours	11	11	0	0	0
Total		51892.5 monthly hours	1933	9.5	7.5	0	0

CURRENT CORE PLANNED STAFFING LEVELS

Gloucestershire
The wards below all work 3 shifts in 24 hours. All ward managers are not included in the staffing numbers below, they are supernumerary. The supporting Sisters/Charges (Band 6) have some supernumerary time in addition to the staffing numbers below.

Ward (Bed numbers) Ward speciality	Early		Late		Night	
	Qualified	Un-qualified	Qualified	Un-qualified	Qualified	Un-qualified
Dean (14) Adult mental health	2	3	2	3	2	1
Abbey (18) Adult mental health	3	2	3	2	2	1
Kingsholm (15) Adult mental health	2	3	2	3	2	1
Priory (22) Adult mental health	3	2	3	2	2	1
Greyfriars (10) Mental health intensive care	3	3	3	3	2	2
Montpellier (12) Mental health low secure	2	3	2	3	2	2
Willow (16) Older people with dementia	2	5	2	5	1	3
Chestnut (14) Older people mental health	2	3	2	2	1	2
Mulberry (18) Older people mental health	2	4	2	3	1	2
Laurel House (13) Adult MH rehabilitation	2	1	1	2	1	1
Honeybourne (10) Adult MH rehabilitation	2	1	1	2	1	1
Westridge (8) Assessment & Treatment Learning disabilities	2	3	2	3	1	3
Hollybrook (8) Habilitation – Learning Disabilities	1 (+1 if not on late shift)	7 (6 if 2 qualified on shift)	1 (+1 if not on late shift)	7 (6 if 2 qualified on shift)	1	5

Herefordshire
The wards below all work 2 shifts in 24 hours. All ward managers are not included in the staffing numbers below, they are supernumerary. The supporting Sisters/Charges (Band 6) are included in the staffing numbers below and do not have additional time.

Ward	Day		Night	
	Qualified	Unqualified	Qualified	Unqualified
Mortimer (21) Adult mental health – note planned reduction to 18 beds	3	2	2	2
Jenny Lind (8) Older people mental health	2	1	1	1
Cantilupe (10) Older people with dementia	2	3	2	1.5
Oak House (10) Adult MH rehabilitation	2	1	1	1

NATIONAL SAFE STAFFING REPORTING - Ward information – April 2015

| | Only complete sites your organisation is accountable for | | Main 2 Specialties on each ward | | Day | | | | Night | | | | Day | | Night | |
| | | | | | Registered midwives/nurses | | Care Staff | | Registered midwives/nurses | | Care Staff | | | | | |
Site code *The Site code is automatically populated when a Site name is selected	Hospital Site name	Ward name	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	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)
RTQ02	WOTTON LAWN HOSPITAL	Dean	710 - ADULT MENTAL ILLNESS		900	937.5	1350	1440	600	470	300	660	104.2%	106.7%	78.3%	220.0%
RTQ02	WOTTON LAWN HOSPITAL	Abbey	710 - ADULT MENTAL ILLNESS		1350	1267.5	900	1035	600	600	300	310	93.9%	115.0%	100.0%	103.3%
RTQ02	WOTTON LAWN HOSPITAL	Priory	710 - ADULT MENTAL ILLNESS		1350	1132.5	900	1147.5	600	590	300	340	83.9%	127.5%	98.3%	113.3%
RTQ02	WOTTON LAWN HOSPITAL	Kingsholm	710 - ADULT MENTAL ILLNESS		900	892.5	1350	1552.5	600	590	300	500	99.2%	115.0%	98.3%	166.7%
RTQ02	WOTTON LAWN HOSPITAL	Montpellier	710 - ADULT MENTAL ILLNESS		900	870	1350	1357.5	600	620	600	580	96.7%	100.6%	103.3%	96.7%
RTQ02	WOTTON LAWN HOSPITAL	Greyfriars	710 - ADULT MENTAL ILLNESS		1350	1140	1350	1620	600	540	600	760	84.4%	120.0%	90.0%	126.7%
RTQ01	Charlton Lane Hospital	Willow	715 - OLD AGE PSYCHIATRY		900	1020	2250	2407.5	300	320	900	980	113.3%	107.0%	106.7%	108.9%
RTQ01	Charlton Lane Hospital	Chestnut	715 - OLD AGE PSYCHIATRY		900	1117.5	1125	1095	300	350	600	680	124.2%	97.3%	116.7%	113.3%
RTQ01	Charlton Lane Hospital	Mulberry	715 - OLD AGE PSYCHIATRY		900	952.5	1365	1890	300	310	600	760	105.8%	138.5%	103.3%	126.7%
RTQ11	Laurel House Chelt	Laurel	710 - ADULT MENTAL ILLNESS		675	532.5	675	825	300	300	300	300	78.9%	122.2%	100.0%	100.0%
RTQ13	HONEYBOURE	honeybourne	710 - ADULT MENTAL ILLNESS		675	607.5	675	862.5	300	300	300	300	90.0%	127.8%	100.0%	100.0%
RTQ05	Westridge	Westridge	700- LEARNING DISABILITY		892.5	630	1365	2122.5	300	390	600	1110	70.6%	155.5%	130.0%	185.0%
RTQ54	HOLLYBROOK	Hollybrook	700- LEARNING DISABILITY		675	667.5	2925	2955	300	330	1500	1410	98.9%	101.0%	110.0%	94.0%
RTQHJ	STONEBOW UNIT	Mortimer	710 - ADULT MENTAL ILLNESS		990	1025	660	800.5	660	660	660	726	103.5%	121.3%	100.0%	110.0%
RTQHJ	STONEBOW UNIT	Cantilupe	715 - OLD AGE PSYCHIATRY		660	891.5	990	1000.5	660	341	465	980	135.1%	101.1%	51.7%	210.8%
RTQHJ	STONEBOW UNIT	Jenny Lind	715 - OLD AGE PSYCHIATRY		660	580	330	590.5	330	330	330	352	87.9%	178.9%	100.0%	106.7%
RTQHM	Oak House	Oak House	710 - ADULT MENTAL ILLNESS		660	752	330	306	330	330	330	345.5	113.9%	92.7%	100.0%	104.7%