

## Safe staffing levels: February 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 February 2015:

- **96.46%** of the hours exactly complied with the planned staffing levels.
- **3.40%** of the hours during January had a lower staff skill mix than the planned staffing levels, however the staffing numbers were compliant
- **0.14%** of the hours during January 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 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 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 2 units have not been able to consistently have 2 qualified nurses on each shift due to the service transition that is currently taking place reflecting the changes that Gloucestershire CCG require.

**Hollybrook:** The Code 1 exceptions where the minimum staff numbers are met however the skill mix is non-compliant but met needs of patients; increased to 16 incidences for

February from 6 in January. There were 5 Code 2 exceptions where the unit was safely managed with reduced staffing numbers, this was due to staff sickness at the Unit.

**Westridge:** The number of shifts with Code 1 exceptions reduced significantly in February to 28 incidences from 44 incidences in January. The Unit was safely managed with reduced qualified staff and no detrimental effect to overall staffing numbers on shift.

There is a constant review of staffing requirements to ensure the service responds to patient needs. Bank staff, overtime and regular agency staff are utilised. HCA recruitment in January was recently successful, this will in time, reduce the number of bank staff and agency staff used at the Units. Recruitment for qualified staff during this time of change remains a challenge; however one staff nurse appointment was achieved in February. Further recruitment for qualified staff is taking place.

### ***Gloucestershire Recovery Units:***

**Laurel House and Honeybourne:** The Units had between 18 and 19 Code 1 exceptions (where the minimum staff numbers are met however the skill mix is non-compliant but met needs of patients) during February. This is due to ongoing high levels of sickness amongst qualified staff. Qualified staff are replaced with HCAs if appropriate as a cost effective measure ensuring patient needs are met.

### ***Charlton Lane Hospital:***

There have been minimal exceptions to the core planned staffing levels across all wards in the hospital.

**Willow Ward:** There has been only 1 code 2 exception. Minimum staffing numbers not compliant but met the needs of the patients. The ward was considered safe and there was no harm to patients.

**Mulberry Ward:** There has been 1 code 1 exception staffing numbers compliant but the skill mix was non-compliant however met the needs of the patients. The ward was considered safe and there was no harm to patients.

**Chestnut Ward:** Chestnut ward have no exceptions this month.

### ***Stonebow Unit:***

**Mortimer Ward:** No exceptions reported this month. The on-going high level of HCA hours was attributed to the continued 2-1 level of nursing of a patient for whom a suitable placement has been identified and has moved out from 2<sup>nd</sup> March on trial for a 4 week period.

**Jenny Lind Ward:** The code 1 exceptions relate to staff sickness although these particular shifts were over numbers in HCAs to support.

**Cantilupe Ward:** The code 1 staffing exceptions relate to one qualified nurse on 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 despite a lengthy period of an increase in 2 beds.

**Oak House:** The only Code 2 exception was due to an HCA on sick leave.

***Wotton Lawn Hospital:***

**Abbey Ward:** Overall decrease with only 2 exceptions during February, however the staffing levels have met the needs of the service during those few occasions.

**Priory Ward:** The ward still has vacancies at present – 2 x Band 5's maternity cover) having recruited to 2 posts in February. There was a small decrease in qualified exceptions despite the ongoing vacancy rate, however, this didn't impact on care delivery. OT & Physiotherapy staff are providing additional support during this period.

**Greyfriars Unit:** There has been an increase in qualified nurse exceptions for this period. There is currently 1 WTE vacancy and 2 staff nurses have been working supernumerary due to pregnancy risk factors.

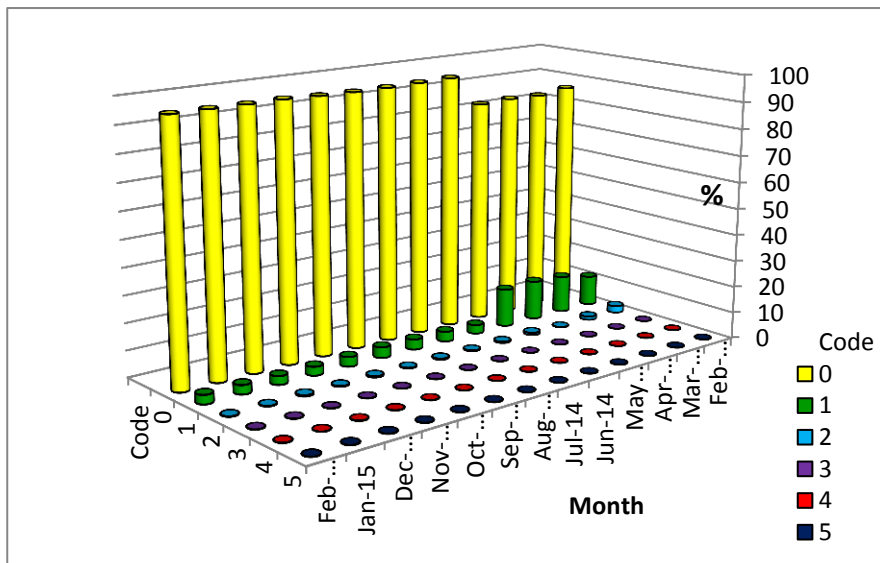
**Montpellier Unit:** The unit has seen a slight decrease where the staffing does not meet the core planned staffing levels but does meet the needs of the patients.

**Dean Ward:** The exception rate has remained static 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.

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

			Exception Code 1	Exception Code 2	Exception Code 3	Exception Code 4	Exception Code 5
Ward	Bed number	Number of required staff hours in the month	Minimum staff numbers met – skill mix non-compliant but met needs of patients	Minimum staff numbers not compliant but met needs of patients	Minimum staff numbers met – skill mix non-compliant and did not meet needs of patients	Minimum staff numbers not compliant and did not meet needs of patients	Minimum staffing nos and skill mix not met. Resulting in clinical incident / harm to patient or other
<b>Gloucestershire</b>							
Dean	14	2940 monthly hours	32.5	0	0	0	0
Abbey	18	2940 monthly hours	7.5	7.5	0	0	0
Priory	22	2940 monthly hours	187.5	7.5	0	0	0
Kingsholm	15	2940 monthly hours	52.5	0	0	0	0
Montpellier	12	3220 monthly hours	52.5	0	0	0	0
Greyfriars	10	3640 monthly hours	325	0	0	0	0
Willow	16	4060 monthly hours	0	7.5	0	0	0
Chestnut	14	2730 monthly hours	0	0	0	0	0
Mulberry	18	2940 monthly hours	7.5	0	0	0	0
Laurel	13	1820 monthly hours	135	0	0	0	0
Honeybourne	10	1820 monthly hours	142.5	0	0	0	0
Westridge	8	2940 monthly hours	210	0	0	0	0
Hollybrook	8	5040 monthly hours	120	40	0	0	0
Mortimer	21	2772 monthly hours	0	0	0	0	0
Jenny Lind	8	1540 monthly hours	67.5	0	0	0	0
Cantilupe	10	2590 monthly hours	308	0	0	0	0
Oak House	10	1540 monthly hours	0	4.5	0	0	0
<b>Total</b>		48412 monthly hours	375.50	67	0	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
<b>Dean (14)</b> Adult mental health	2	3	2	3	2	1
<b>Abbey (18)</b> Adult mental health	3	2	3	2	2	1
<b>Kingsholm (15)</b> Adult mental health	2	3	2	3	2	1
<b>Priory (22)</b> Adult mental health	3	2	3	2	2	1
<b>Greyfriars (10)</b> Mental health intensive care	3	3	3	3	2	2
<b>Montpellier (12)</b> Mental health low secure	2	3	2	3	2	2
<b>Willow (16)</b> Older people with dementia	2	5	2	5	1	3
<b>Chestnut (14)</b> Older people mental health	2	3	2	2	1	2
<b>Mulberry (18)</b> Older people mental health	2	4	2	3	1	2
<b>Laurel House (13)</b> Adult MH rehabilitation	2	1	1	2	1	1
<b>Honeybourne (10)</b> Adult MH rehabilitation	2	1	1	2	1	1
<b>Westridge (8)</b> Assessment & Treatment Learning disabilities	2	3	2	3	1	3
<b>Hollybrook (8)</b> 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
<b>Mortimer (21)</b> Adult mental health – note planned reduction to 18 beds	3	2	2	2
<b>Jenny Lind (8)</b> Older people mental health	2	1	1	1
<b>Cantilupe (10)</b> Older people with dementia	2	3	2	1.5
<b>Oak House (10)</b> Adult MH rehabilitation	2	1	1	1

## NATIONAL SAFE STAFFING REPORTING - Ward information – February 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				
Dean	710 - ADULT MENTAL ILLNESS		840	840	1260	1335	560	550	280	330	100.0%	106.0%	98.2%	117.9%
Abbey	710 - ADULT MENTAL ILLNESS		1260	1275	840	892.5	560	570	280	320	101.2%	106.3%	101.8%	114.3%
Priory	710 - ADULT MENTAL ILLNESS		1260	1110	840	1042.5	560	560	280	300	88.1%	124.1%	100.0%	107.1%
Kingsholm	710 - ADULT MENTAL ILLNESS		840	855	1260	1245	560	560	280	480	101.8%	98.8%	100.0%	171.4%
Montpellier	710 - ADULT MENTAL ILLNESS		840	915	1260	1162.5	560	560	560	560	108.9%	92.3%	100.0%	100.0%
Greyfriars	710 - ADULT MENTAL ILLNESS		1260	1035	1260	1852.5	560	490	560	670	82.1%	147.0%	87.5%	119.6%
Willow	715 - OLD AGE PSYCHIATRY		840	1050	2100	2227.5	280	360	840	890	125.0%	106.1%	128.6%	106.0%
Chestnut	715 - OLD AGE PSYCHIATRY		840	1125	1050	975	280	300	560	690	133.9%	92.9%	107.1%	123.2%
Mulberry	715 - OLD AGE PSYCHIATRY		840	1020	1260	1545	280	300	560	830	121.4%	122.6%	107.1%	148.2%
Laurel	710 - ADULT MENTAL ILLNESS		630	555	630	750	280	280	280	280	88.1%	119.0%	100.0%	100.0%
honeyboume	710 - ADULT MENTAL ILLNESS		630	510	630	750	280	280	280	280	81.0%	119.0%	100.0%	100.0%
Westridge	700- LEARNING DISABILITY		840	645	1260	1875	280	320	560	1080	76.8%	148.8%	114.3%	192.9%
Hollybrook	700- LEARNING DISABILITY		630	487.5	2730	2850	280	290	1400	1380	77.4%	104.4%	103.6%	98.6%
Mortimer	710 - ADULT MENTAL ILLNESS		1023	1205.5	682	1780.5	682	704	682	1778.5	117.8%	261.1%	103.2%	260.8%
Cantilupe	715 - OLD AGE PSYCHIATRY		682	1039.5	1023	1049.5	682	363	480.5	1001	152.4%	102.6%	53.2%	208.3%
Jenny Lind	715 - OLD AGE PSYCHIATRY		682	688	341	490.5	341	341	341	337	100.9%	143.8%	100.0%	98.8%
Oak House	710 - ADULT MENTAL ILLNESS		682	700.5	341	407.5	341	341	341	361	102.7%	119.5%	100.0%	105.9%