

Safe staffing levels: January 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 January 2015:

- **96.45%** of the hours exactly complied with the planned staffing levels.
- **3.41%** 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: Code 1 exceptions where the qualified staffing fell below requirements reduced from 10 in December to 6 in January. There was 1 Code 2 exception where the unit was safely managed with reduced staffing numbers.

Westridge: The number of shifts with Code 1 exceptions has a slight increase from last month at 44 incidences. 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, recruitment is taking place again in February.

Gloucestershire Recovery Units:

Laurel House and Honeybourne : Both units had 21 Code 1 incidences during January, where the qualified staffing fell below core planned staffing requirements. This is due to ongoing high levels of sickness amongst qualified staff. Qualified staff are replaced with HCA's 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 have been 8 Code 1 exceptions. 4 were due to being one qualified staff down but numbers made up with HCA's. The ward has been considered safe as there was one vacant bed and many patients have been in bed due to Norovirus.

Mulberry Ward: There have been 4 Code 1 exceptions again the ward has had Norovirus and although busy there were 4 empty beds for a week. The ward was considered safe.

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 is attributed to the continued 2-1 level of nursing of a patient for whom a suitable placement has been provisionally identified but the plan of care is being carefully planned and costed.

Jenny Lind Ward: The few code 1 exceptions relate to staff sickness although these particular shifts were over numbers in HCAs to support. The 1 night code 2 reduction in staff was due to the need for an HCA to escort a patient to the County Hospital for 4 hours.

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 an increase in 2 beds.

Oak House: Recruitment is completed and the unit is mostly meeting its core planned staffing levels. Only 2 exceptions: Code 1 due to staff sickness and the code 2 was safe as a number of patients were on leave on that day.

Wotton Lawn Hospital

Abbey Ward: There is a slight decrease in shifts where there are two qualified nurses on duty as a result of short term staff absence, however the staffing levels have met the needs of the service during those few occasions.

Priory Ward: The ward still has vacancies at present – 4 x Band 5's (includes 2 x maternity cover) which are on a continuous cycle of advertising. Staff bank are able to support the ward with HCA's. There is still an impact on the minimum establishment, however, this is has been stabilised at the present time.

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.

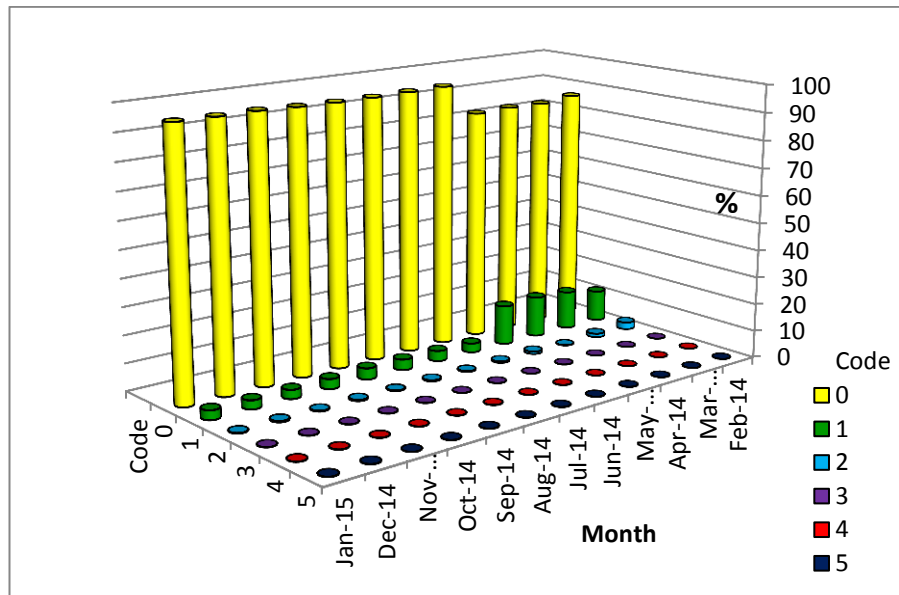
Montpellier Unit: The unit has seen a slight increase in number of shifts where the staffing does not meet the core planned staffing levels but does meet the needs of the patients. Accrued annual leave and sickness absence has contribute to the slight increase.

Dean Ward: There has been a slight decrease in shifts 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 three shift exceptions were due to last minute sickness.

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	3255 monthly hours	40	0	0	0	0
Abbey	18	3255 monthly hours	30	15	0	0	0
Priory	22	3255 monthly hours	247.5	7.5	0	0	0
Kingsholm	15	3255 monthly hours	22.5	0	0	0	0
Montpellier	12	3565 monthly hours	97.5	0	0	0	0
Greyfriars	10	4030 monthly hours	240	17.5	0	0	0
Willow	16	4525 monthly hours	67.5	0	0	0	0
Chestnut	14	3022.5 monthly hours	0	0	0	0	0
Mulberry	18	3255 monthly hours	30	0	0	0	0
Laurel	13	2015 monthly hours	157.5	0	0	0	0
Honeybourne	10	2015 monthly hours	157.5	0	0	0	0
Westridge	8	3255 monthly hours	330	0	0	0	0
Hollybrook	8	5580 monthly hours	45	7.5	0	0	0
Mortimer							
Mortimer	21	3069 monthly hours	0	0	0	0	0
Jenny Lind	8	1705 monthly hours	45.5	15	0	0	0
Cantilupe	10	2867.5 monthly hours	319	0	0	0	0
Oak House	10	1705 monthly hours	1.5	11	0	0	0
Total		53629 monthly hours	1831	7.5	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
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 – January 2015

Only complete sites your organisation is accountable for				Day				Night				Day		Night		
Hospital Site Details		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 (%)
Site code *The Site code is automatically populated when a Site name is selected	Hospital Site 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				
RTQ02	WOTTON LAWN HOSPITAL	Dean	710 - ADULT MENTAL ILLNESS		930	967.5	1395	1800	620	620	310	550	104.0%	129.0%	100.0%	177.4%
RTQ02	WOTTON LAWN HOSPITAL	Abbey	710 - ADULT MENTAL ILLNESS		1395	1425	930	945	620	620	310	310	102.2%	101.6%	100.0%	100.0%
RTQ02	WOTTON LAWN HOSPITAL	Priory	710 - ADULT MENTAL ILLNESS		1395	1170	930	1215	620	630	310	310	83.9%	130.6%	101.6%	100.0%
RTQ02	WOTTON LAWN HOSPITAL	Kingsholm	710 - ADULT MENTAL ILLNESS		930	960	1395	1680	620	630	310	600	103.2%	120.4%	101.6%	193.5%
RTQ02	WOTTON LAWN HOSPITAL	Montpellier	710 - ADULT MENTAL ILLNESS		930	1005	1395	1260	620	620	620	610	108.1%	90.3%	100.0%	98.4%
RTQ02	WOTTON LAWN HOSPITAL	Greyfriars	710 - ADULT MENTAL ILLNESS		1395	1200	1395	1665	620	590	620	710	86.0%	119.4%	95.2%	114.5%
RTQ01	Charlton Lane Hospital	Willow	715 - OLD AGE PSYCHIATRY		960	1057.5	2325	2460	310	350	930	940	110.2%	105.8%	112.9%	101.1%
RTQ01	Charlton Lane Hospital	Chestnut	715 - OLD AGE PSYCHIATRY		930	1290	1162.5	1050	310	330	620	680	138.7%	90.3%	106.5%	109.7%
RTQ01	Charlton Lane Hospital	Mulberry	715 - OLD AGE PSYCHIATRY		930	1027.5	1395	1830	310	330	620	810	110.5%	131.2%	106.5%	130.6%
RTQ11	Laurel House Chelt	Laurel	710 - ADULT MENTAL ILLNESS		697.5	577.5	697.5	907.5	310	310	310	310	82.8%	130.1%	100.0%	100.0%
RTQ13	HONEYBOURE	honeybourne	710 - ADULT MENTAL ILLNESS		697.5	600	697.5	825	310	310	310	310	86.0%	118.3%	100.0%	100.0%
RTQ05	Westridge	Westridge	700- LEARNING DISABILITY		930	600	1395	2205	310	340	620	1200	64.5%	158.1%	109.7%	193.5%
RTQ54	HOLLYBROOK	Hollybrook	700- LEARNING DISABILITY		697.5	712.5	3022.5	3015	310	347.5	1550	1530	102.2%	99.8%	112.1%	98.7%
RTQHJ	STONEBOW UNIT	Morimer	710 - ADULT MENTAL ILLNESS		1023	1205.5	682	1780.5	682	704	682	1778.5	117.8%	261.1%	103.2%	260.8%
RTQHJ	STONEBOW UNIT	Cantlupe	715 - OLD AGE PSYCHIATRY		682	1039.5	1023	1049.5	682	363	480.5	1001	152.4%	102.6%	53.2%	208.3%
RTQHJ	STONEBOW UNIT	Jenny Lind	715 - OLD AGE PSYCHIATRY		682	688	341	490.5	341	341	341	337	100.9%	143.8%	100.0%	98.8%
RTQHM	Oak House	Oak House	710 - ADULT MENTAL ILLNESS		682	700.5	341	407.5	341	341	341	361	102.7%	119.5%	100.0%	105.9%