

Safe staffing levels: March 2016 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 March 2016 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 summary for March 2016:

- No staffing issues were escalated to the Director of Quality or the Deputy Director
- Where staffing levels dipped below the planned fill rates of 100% for qualified nurses this was usually offset by increasing staffing numbers of unqualified nurses based on ward acuity and dependency and the professional judgement of the nurse in charge of the shift
- **96.83%** of the hours exactly complied with the planned staffing levels
- **2.8%** of the hours during March had a different staff skill mix than planned staffing however overall the staffing numbers were compliant and the needs of patients were met
- **0.3%** of the hours during March had a lower number of staff on duty than the planned levels.
- *There were 3 shifts where it has been reported that the skill-mix of staff was non-compliant and the needs of patients were not met.*

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.

Wotton Lawn Hospital (High level exceptions only)

Greyfriars:

The Code 1 exceptions are due to 1 WTE qualified staff vacancy, annual leave, 1 occurrence of staff sickness and 1 occurrence of staff training.

Abbey Ward:

All Code 1 exceptions are due to backfilling vacancies and sickness.

The Code 4 exception is owing to the ward currently rostering 6 staff as a minimum level to manage the current use of males in female beds in the female corridor. The 6th member of staff was an agency nurse who cancelled their shift at the last minute. We were not able to get another member of staff to fill this. No issues regarding patient safety were raised to the Director of Quality

The Code 3 exceptions were owing to qualified staff skill mix being non-compliant. (2 qualified v planned 3 qualified). The 2 qualified members of staff were unable to meet all the needs of patients. This did not affect patient safety but all patient activity did not take place

Priory Ward:

The Code 1 exceptions are due to the current number of band 5 vacancies that the ward currently has.

Stonebow Unit:

Cantilupe Ward:

High fill rates relating to unqualified staff at night are owing to the reduced fill levels for qualified staff and increased acuity levels on the ward

Jenny Lind Ward:

Code 1 exceptions relate to sickness and qualified vacancies covering with HCAs who are familiar with the ward rather than using unknown qualified agency staff.

The high average fill rate relates mainly to the increased use of bank and agency HCAs due to the high level of acuity on the wards.

Learning Disability Units:

The continued staffing shortfall in the Learning Disability units is identified on the Countywide risk register due to the service transition that is currently taking place. Recruitment to qualified staff remains a challenge - band 5 nurse interviews took place on March 8th, there were four successful candidates, three of which are student nurses who will not have their PIN till August/September. Recruitment into the remaining HCA vacancies continues to be ongoing.

Westridge and Hollybrook:

There were no significant exceptions during March 2016.

Gloucestershire Recovery Units:

Honeybourne and Laurel House:

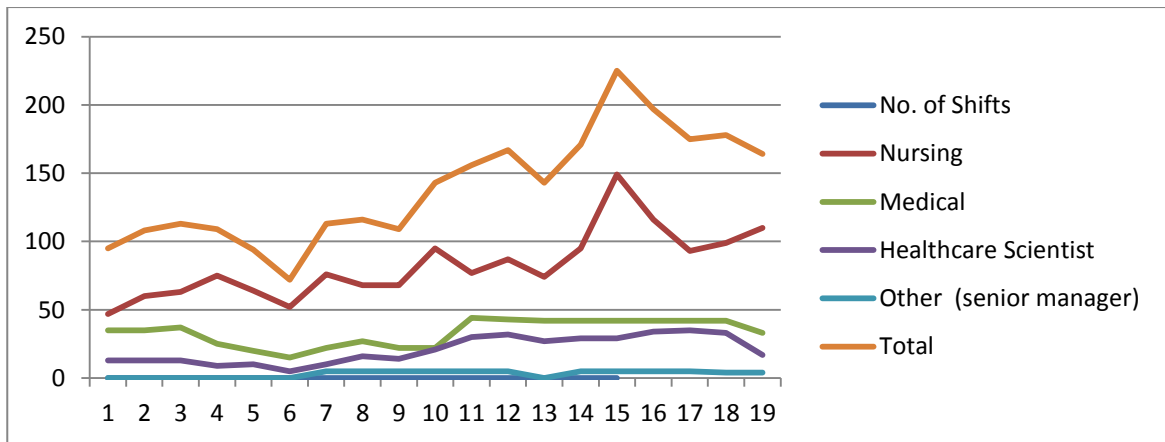
During March both units have reported Code 1 exceptions where the Unit was safely managed with reduced qualified staff. This has been supported by use of additional unqualified staff to meet the needs of patients. These are mainly due to 3 qualified nurse vacancies (LH =1 , HB =2) which all have 'preferred candidate' status within the recruitment process. There was one incident of Code 3 exception at Honeybourne , which was due to last minute staff sickness, however patient safety was maintained and additional staff (OT and 2 student Nurses) were in attendance throughout the majority of the shift.

Charlton Lane Hospital:

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

Month by month comparison of compliance with staffing levels

The table below provides a monthly comparison of staffing level compliance. Consistently high levels of compliance in terms of actual staff on shift to planned levels are maintained.



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 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
Gloucestershire							
Dean	14	3255 monthly hours	0	0	0	0	0
Abbey	18	3255 monthly hours	232.5	50	15	7.5	0
Priory	22	3255 monthly hours	210	60	0	0	0
Kingsholm	15	3255 monthly hours	45	0	0	0	0
Montpellier	12	3565 monthly hours	40	0	0	0	0
Greyfriars	10	4030 monthly hours	270	0	0	0	0
Willow	16	4495 monthly hours	0	0	0	0	0
Chestnut	14	3022.5 monthly hours	67.5	0	0	0	0
Mulberry	18	3255 monthly hours	0	0	0	0	0
Laurel	12	2015 monthly hours	90	0	0	0	0
Honeybourne	10	2015 monthly hours	217.5	0	7.5	0	0
Westridge	8	3565 monthly hours	0	0	0	0	0
Hollybrook	8	5580 monthly hours	7.5	102.5	0	0	0
Herefordshire							
Mortimer	21	3069 monthly hours	10.25	0	0	0	0
Jenny Lind	8	1705 monthly hours	298	0	0	0	0
Cantilupe	12	2867.5 monthly hours	34.5	0	0	0	0
Oak House	12	1705 monthly hours	0	0	0	0	0
Total	Monthly hrs	53909	1522.75	162.5	22.5	7.5	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 – March 2016

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	945	1395	1552.5	620	620	310	450	101.6%	111.3%	100.0%	145.2%
RTQ02	WOTTON LAWN HOSPITAL	Abbey	710 - ADULT MENTAL ILLNESS		1395	1147.5	930	1582.5	620	620	310	640	82.3%	170.2%	100.0%	206.5%
RTQ02	WOTTON LAWN HOSPITAL	Priory	710 - ADULT MENTAL ILLNESS		1395	1125	930	1815	620	670	310	680	80.6%	195.2%	108.1%	219.4%
RTQ02	WOTTON LAWN HOSPITAL	Kingsholm	710 - ADULT MENTAL ILLNESS		930	960	1395	1455	620	590	310	410	103.2%	104.3%	95.2%	132.3%
RTQ02	WOTTON LAWN HOSPITAL	Montpellier	710 - ADULT MENTAL ILLNESS		930	930	1395	1372.5	620	610	620	610	100.0%	98.4%	98.4%	98.4%
RTQ02	WOTTON LAWN HOSPITAL	Greyfriars	710 - ADULT MENTAL ILLNESS		1395	1162.5	1395	1907.5	620	620	620	1047.5	83.3%	136.7%	100.0%	169.0%
RTQ01	Charlton Lane Hospital	Willow	715 - OLD AGE PSYCHIATRY		930	525	2325	2400	310	360	930	910	56.5%	103.2%	116.1%	97.8%
RTQ01	Charlton Lane Hospital	Chestnut	715 - OLD AGE PSYCHIATRY		930	975	1162.5	1230	310	320	620	700	104.8%	105.8%	103.2%	112.9%
RTQ01	Charlton Lane Hospital	Mulberry	715 - OLD AGE PSYCHIATRY		930	1020	1395	1845	310	320	620	690	109.7%	132.3%	103.2%	111.3%
RTQ11	Laurel House Chelt	Laurel	710 - ADULT MENTAL ILLNESS		697.5	660	697.5	727.5	310	310	310	310	94.6%	104.3%	100.0%	100.0%
RTQ13	HONEYBOURE	honeybourne	710 - ADULT MENTAL ILLNESS		697.5	480	697.5	922.5	310	310	310	310	68.8%	132.3%	100.0%	100.0%
RTQ05	Westridge	Westridge	700- LEARNING DISABILITY		465	502.5	1860	1905	310	330	930	910	108.1%	102.4%	106.5%	97.8%
RTQ54	HOLLYBROOK	Hollybrook	700- LEARNING DISABILITY		465	652.5	3255	3067.5	310	310	1550	1530	140.3%	94.2%	100.0%	98.7%
RTQHJ	STONEBOW UNIT	Mortimer	710 - ADULT MENTAL ILLNESS		1023	1066.25	682	1103	682	713	682	1022.25	104.2%	161.7%	104.5%	149.9%
RTQHJ	STONEBOW UNIT	Cantilupe	715 - OLD AGE PSYCHIATRY		682	662	1023	1756.5	682	425.5	480.5	1667.5	97.1%	171.7%	62.4%	347.0%
RTQHJ	STONEBOW UNIT	Jenny Lind	715 - OLD AGE PSYCHIATRY		682	687	341	747.5	341	356.5	341	713	100.7%	219.2%	104.5%	209.1%
RTQHM	Oak House	Oak House	710 - ADULT MENTAL ILLNESS		682	727	341	425	341	356.5	341	356.5	106.6%	124.6%	104.5%	104.5%