

## **Safe staffing levels: March 2017 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 2017 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 2017:

- 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
- **97.3%** of the hours exactly complied with the planned staffing levels
- **2.2%** 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
- **0.5%** of the hours during March 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.

## **Wotton Lawn Hospital (High level exceptions only)**

### **Greyfriars**

The Code 1 exceptions were due to vacancies and sickness rates.

### **Priory Ward**

Code 1 and 2 exceptions were due to vacancy and annual leave of band 5 nurses. Patient needs were met and the ward met minimal staffing numbers by using unregistered regular bank staff rather than using nursing agencies.

### **Stonebow Unit:**

Only exceptions of note for Herefordshire continues to be code 1 on Cantilupe Ward (apart from 4.5 hours at Code 2 on Oak House): exceptions continue to relate specifically to the difficulty in covering qualified at night according to the model mainly due to level of vacancies, ensuring equitable shift rotation and accommodating the 30 minute handover. These are covered wherever possible with HCAs who are familiar with the ward rather than using unknown qualified agency staff. Bank staff availability is improving and the Peripatetic Team of HCAs are starting through April.

The high average fill rate relates to the additional use of bank and agency HCAs due to the level of acuity across the wards. The extra 30 minute handover period is also accounted for.

### **Charlton Lane Hospital:**

#### **Chestnut Ward:**

13 code 1 exceptions, 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.

#### **Recovery Units**

Both Recovery Inpatient Units have provided a safe and therapeutic environment for people recovering from severe and enduring mental illness. Minimal staffing numbers have been met although skill mix has been reduced. This has been due to 1.4 WTE qualified vacancies (potential loss of 28 shifts) and qualified sickness. This has not affected patient pathways, with discharges and admissions continuing as planned.

			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	15	3255 monthly hours	0	30	0	0	0
Abbey	18	3255 monthly hours	105	22.5	0	0	0
Priory	18	3255 monthly hours	105	127.5	0	0	0
Kingsholm	15	3255 monthly hours	22.5	0	0	0	0
Montpellier	12	3565 monthly hours	7.5	7.5	0	0	0
Greyfiars	10	4030 monthly hours	232.5	0	0	0	0
Willow	16	4475 monthly hours	15	0	0	0	0
Chestnut	14	3022.5 monthly hours	98.5	0	0	0	0
Mulberry	18	3255 monthly hours	45	0	0	0	0
Laurel	12	2015 monthly hours	150	0	0	0	0
Honeybourne	10	2015 monthly hours	67.5	0	0	0	0
Westridge	8	3565 monthly hours	0	10	0	0	0
Hollybrook	8	5600 monthly hours	15	52.5	0	0	0
<b>Herefordshire</b>							
Mortimer	21	3069 monthly hours	0	0	0	0	0
Jenny Lind	8	2867.5 monthly hours	316	0	0	0	0
Cantilupe	12	1705 monthly hours	0	0	0	0	0
Oak House	10	1705 monthly hours	0	4.5	0	0	0
<b>Total</b>		53909 monthly hrs	1178.5	254.5	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
<b>Dean (15)</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 (18)</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 – March 2017

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		930	905	1395	1750	620	640	310	540	97.3%	125.4%	103.2%	174.2%
Abbey	710 - ADULT MENTAL ILLNESS		1395	1305	930	1005	620	620	310	320	93.5%	108.1%	100.0%	103.2%
Priory	710 - ADULT MENTAL ILLNESS		1395	1177.5	930	1320	620	620	310	430	84.4%	141.9%	100.0%	138.7%
Kingsholm	710 - ADULT MENTAL ILLNESS		930	915	1395	1387.5	620	620	310	310	98.4%	99.5%	100.0%	100.0%
Montpellier	710 - ADULT MENTAL ILLNESS		930	982.5	1395	1372.5	620	620	620	690	105.6%	98.4%	100.0%	111.3%
Greyfriars	710 - ADULT MENTAL ILLNESS		1395	1200	1395	1605	620	580	620	760	86.0%	115.1%	93.5%	122.6%
Willow	715 - OLD AGE PSYCHATRY		930	945	2325	2385	310	320	910	950	101.6%	102.6%	103.2%	104.4%
Chestnut	715 - OLD AGE PSYCHATRY		930	862.5	1162.5	1237.5	310	310	620	640	92.7%	106.5%	100.0%	103.2%
Mulberry	715 - OLD AGE PSYCHATRY		930	465	1395	1657.5	310	310	620	620	50.0%	118.8%	100.0%	100.0%
Laurel	710 - ADULT MENTAL ILLNESS		697.5	555	697.5	870	310	310	310	340	79.6%	124.7%	100.0%	109.7%
honeybourne	710 - ADULT MENTAL ILLNESS		697.5	720	697.5	757.5	310	310	310	310	103.2%	108.6%	100.0%	100.0%
Westridge	700- LEARNING DISABILITY		465	585	1860	1620	310	330	930	860	125.8%	87.1%	106.5%	92.5%
Hollybrook	700- LEARNING DISABILITY		465	750	3255	3517.5	310	340	1570	2170	161.3%	108.1%	109.7%	138.2%
Mortimer	710 - ADULT MENTAL ILLNESS		1023	1069.5	682	955.5	682	713	682	782	104.5%	140.1%	104.5%	114.7%
Cantilupe	715 - OLD AGE PSYCHATRY		682	761.5	1023	1622	682	425.5	480.5	1526	111.7%	158.6%	62.4%	317.6%
Jenny Lind	715 - OLD AGE PSYCHATRY		682	713	341	734.5	341	356.5	341	713	104.5%	215.4%	104.5%	209.1%
OakHouse	710 - ADULT MENTAL ILLNESS		682	759	341	392.5	341	356.5	341	356.5	111.3%	115.1%	104.5%	104.5%