



The Dudley Group
NHS Foundation Trust

Paper for submission to the Board of Directors on 3rd August 2017

TITLE:	Monthly Nurse/Midwife Staffing Position – August 2017 report containing June 2017 data		
AUTHOR:	Derek Eaves Professional Lead for Quality	PRESENTER:	Siobhan Jordan Interim Chief Nurse
CORPORATE OBJECTIVE:			
SO1: Deliver a great patient experience			
SO2: Safe and Caring Services			
SUMMARY OF KEY ISSUES:			
<p>The attached paper contains the actual and planned hours for qualified and unqualified staff for both day and night shifts for each area of the hospital. The fill rates and the Care Hours per Patient Day (CHPPD) are also tabled. It can be seen that in general the fill rates are generally close to but less than one hundred percent of the current establishment and there has been some improvement in these figures from January.</p> <p>With regards to the staffing review:</p> <ul style="list-style-type: none"> Phase 1 covering the Surgical Wards is now complete. The proposed increase in staffing has been discussed at the Finance and Performance Committee in July. Phase 2 covering Paediatrics and the Neonatal Unit is now awaiting review by the Executive Team. Phase 3 covering the Medical Wards is part completed. Phase 4 will consist of the other areas within the hospital. Phase 5 the Community. <p>Following the completion of Phase 1 the Chief Nurse and the Human Resources Director have drawn up an implementation plan to ensure effective recruitment and retention in order to have a substantive workforce providing high quality patient care.</p>			
IMPLICATIONS OF PAPER:			
RISK			Risk Description:
	Risk Register		Risk Score:
COMPLIANCE and/or LEGAL REQUIREMENTS	CQC	N	Details:
	Monitor	Y	Details:
	Other	Y	Details: Internal Audit
ACTION REQUIRED OF BOARD:			
Decision	Approval	Discussion	Other
		✓	
RECOMMENDATIONS FOR THE BOARD: To note and consider the safe staffing data and the position with the ongoing staffing review.			

Monthly Nurse/Midwife Staffing Position

August 2017 Report containing June 2017 data

The attached Safer Staffing Summary (Appendix1) shows the actual and planned hours for four categories of staff, qualified and unqualified staff for both day and night shifts, for each area of the Trust for June 2017 (Wards that have been fully or partially closed in the month are omitted). As well as showing the actual and planned hours the report shows the fill rate for each of the four categories. The totals for the Trust are also indicated. In addition, the last four columns show the actual Care Hours Per Patient Day (CHPPD). We provide this information to NHS Improvement and part of it is utilised in the National Model Hospital dataset.

The report shows that the overall fill rates for the Trust are nearly 100% but this has been achieved by using the present establishments and a significant reliance on temporary staff (bank and agency). A number of factors make it unlikely that a full fill rate will always be achieved although this is the aim. These factors include long term issues such as vacancies, short term issues such as sickness and maternity leave, the unavailability of temporary staff and unexpected numbers of patients requiring enhanced care.

It can be seen that for individual wards the fill rates vary although in the main they are close to 100%. On occasion, the fill rate is over 100%. C2, the paediatric ward, is a particular exception with regards to this as the planned hours are derived from the RCN dependency tool. Each shift the planned hours are determined by the acuity of the children on the ward. Sometimes there are occasions when the fill rate of unqualified staff goes above 100%. This occurs when it is recognised that there will be a reduction in qualified staff.

The chart below shows that the percentage fill rates have been improving over the year.

Table 1. Percentage fill rates January 2017 to the present

	Qualified Day	Unqualified Day	Qualified Night	Unqualified Night
Jan	94%	96%	94%	99%
Feb	93%	95%	96%	99%
Mar	95%	97%	97%	100%
Apr	97%	96%	98%	98%
May	97%	97%	99%	98%
June	96%	96%	98%	99%

With regards to the CHPPD, as has been explained in previous reports this is a new indicator that can be used to benchmark the Trust.

Table 2. Care Hours Per Patient Day (CHPPD) – Overall Trust Regional Comparators

2017 Month	TRUST Nurse & Midwife	Midlands & East Median	National Median	TRUST Care Support Workers	Midlands & East Median	National Median	TRUST Total number	Midlands & East Median	National Median
January	4.30	4.7	4.7	3.50	2.9	2.9	7.8	7.7	7.6
February	4.34	N/A	N/A	3.63	N/A	N/A	7.97	N/A	N/A
March	4.44	N/A	N/A	3.74	N/A	N/A	8.18	N/A	N/A
April	4.55	4.8	4.8	3.73	3.1	3.1	8.28	7.8	7.9
May	4.38	N/A	N/A	3.83	N/A	N/A	8.22	N/A	N/A
June	4.36	N/A	N/A	3.58	N/A	N/A	7.95	N/A	N/A

N/A = Data not yet available (Please note April Regional/National data is new for this report)

The recently published regional and national average figures for April indicate that the Trust is below these averages for qualified staff but higher for care support workers.

As part of the staffing review being undertaken the comparative data in the Model Hospital has been considered. The examples below are for surgery as the review has just been completed for these wards.

Table 3. Care Hours Per Patient Day (CHPPD) for Surgery – Trust and Regional and National Medians

Speciality/ Staffing Type						
T AND O	B1	B2H	B2T	Peer Median	National Median	
Total	6.62	7.81	7.13	6.68	7.3	
Registered	3.94	2.78	2.65	3.54	3.8	
HCSW	2.68	4.84	4.48	3.08	3.34	
SURGERY	B3	B4	B5	Peer Median	National Median	
Total	6.94	6.19	5.47	6.95	7.4	
Registered	3.35	2.83	3.49	3.95	4.44	
HCSW	3.6	3.36	1.98	2.86	2.95	
UROLOGY	C6				Peer Median	National Median
Total	6.15				6.47	7.06
Registered	3.35				3.62	4.18
HCSW	2.81				2.81	2.81

(Peer Median is for NHSI Region) (These figures from April 2017 are the latest available)

It has to be stressed that these figures need to be interpreted with caution. For instance, the Model Hospital has only a single median figure for both paediatrics and neonates and one would expect these to be different based on the different nature of a specialist unit compared to a general paediatric ward. Also, with regards to trauma and orthopaedics the median figures are for all of these wards, the majority of which will be general T&O wards like B1

while comparing these median figures is less applicable to, say, B2 hip suite a specialised area having many elderly and patients with dementia.

All Trust figures that are less than both the peer and national median have been put into bold and italics and it can be seen that the majority of the qualified staffing (6 out of 7 areas) and many of the total staffing figures (5 out of 7 areas) are less than both medians. This is confirmed by the review's findings, which has shown staff to patient ratios less than national standards.

The Trust is just starting to use this comparative data and this will continue and become more refined as time progresses. A visit from NHSI specialists on both nurse staffing and this data is being arranged.

Conclusion

This report demonstrates that we are achieving nearly 100% fill rate and there is a continued commitment to do so. Benchmarking the Trust workforce data using the CHPPD is informative and will continue.

The staffing review which commenced in May is using data from a wide variety of sources to inform and ensure the required outcome. As well as considering the above data, the review is structured discussions with senior nurses from each area together with their managers using information on establishments, staffing ratios and vacancy, sickness and temporary staffing rates. It is also considering the outcome of the most recent six monthly Safer Nursing Tool exercise. The outcome of the five phases of the review (1.Surgery, 2. Neonates and Paediatrics, 3. Medicine, 4. Rest of the Hospital, 5.Community) will be reported, as agreed, to the Board of Directors as each phase is completed. The first phase outcome is being discussed at the Finance and Performance Committee in July and at the Board of Directors in August.

APPENDIX 1

Safer Staffing Summary		Jun		Days in Month				30									
Ward	Day RN	Day RN	Day CSW	Day CSW	Night RN	Night RN	Night CSW	Night CSW	Qual Day	UnQual		UnQual		Sum	Actual CHPPD		
	Day RM	Day RM	Day MSW	Day MSW	Night RM	Night RM	Night MSW	Night MSW		Day	Qual N	N	24:00 Occ		Registered	Care staff	Total
	Plan	Actual	Plan	Actual	Plan	Actual	Plan	Actual									
Evergreen																	
A2	240	234	210	201	150	147	180	180	98%	96%	98%	100%	1,052	4.35	4.35	8.69	
A3																	
A4																	
B1	108	104	63	60	64	64	58	56	96%	95%	100%	97%	499	3.82	2.79	6.61	
B2(H)	120	116	215	197	90	88	190	182	96%	92%	98%	96%	854	2.86	5.33	8.19	
B2(T)	90	90	169	160	60	60	141	138	100%	95%	100%	98%	665	2.64	5.38	8.02	
B3	190	183	169	161	157	154	140	132	96%	95%	98%	94%	961	4.11	3.58	7.68	
B4	180	174	222	200	150	144	169	162	97%	90%	96%	96%	1,269	2.94	3.42	6.36	
B5	180	177	120	120	150	151	90	90	98%	100%	101%	100%	988	3.89	2.55	6.45	
B6																	
C1	180	165	314	285	150	143	199	188	92%	91%	95%	94%	1,385	2.67	4.10	6.77	
C2	196	213	74	76	161	178	41	49	109%	103%	111%	120%	739	6.21	1.82	8.03	
C3	184	181	390	370	163	160	393	391	98%	95%	98%	99%	1,524	2.68	5.99	8.67	
C4	150	136	61	62	90	86	90	84	91%	102%	96%	93%	629	4.13	2.79	6.91	
C5	180	157	240	250	150	130	179	190	87%	104%	87%	106%	1,392	2.36	3.79	6.15	
C6	90	90	61	60	60	61	60	59	100%	98%	102%	98%	459	3.85	3.11	6.96	
C7	180	176	131	133	120	117	132	135	98%	102%	98%	102%	1,067	3.21	3.01	6.23	
C8	197	189	239	238	180	174	249	250	96%	100%	97%	100%	2,465	1.69	2.33	4.02	
CCU_PCCU	210	171	41	40	150	146	2	5	81%	98%	97%	250%	688	5.52	0.78	6.31	
Critical Care	320	320	59	54	318	317	-	-	100%	92%	100%		317	23.61	1.87	25.48	
EAU	180	175	150	146	150	150	150	145	97%	97%	100%	97%	633	6.02	5.52	11.54	
Maternity	532	523	210	204	510	498	150	145	98%	97%	98%	97%	525	19.35	7.78	27.14	
MHDU	110	102	33	33	110	103	4	4	93%	98%	94%	100%	179	13.74	2.32	16.07	
NNU	203	181	-	-	190	178	-	-	89%		94%		438	9.63	0.00	9.63	
TOTAL	4,019	3,855	3,171	3,049	3,323	3,249	2,617	2,585	96%	96%	98%	99%	18,728	4.36	3.58	7.95	