

Report to:	Board of Directors		Date:	31 January 2018		
Subject:	Safe Staffing report	t				
Report of:	Director of Nursing	g and Quality	Prepared by:	Corporate Lead Nurse Workforce		
REPORT FOR INFORMATION						
Corporate objective ref:		Summary of Report This report provides an overview of Registered Nurse (RN) Registered Midwife (RM) and staffing levels for the month of December 2017.				
Board Assurance Framework ref:		Key points of note are as follows; RN and RM staffing vacancies across the Trust equates to 187.6 whole time equivalents. Average fill rates for Registered staff, including Registered Nurse (RN) and Registered Midwives (RM) and non-registered care staff				
CQC Registration Standards ref:	Safe staffing	remains above 90% for both day and night duty 5 medical wards, 1 surgical ward, 1 area in child and family (neonates) report below 90% registered staff in the month. Temporary staff, both agency and NHS professionals, have been utilised in the clinical areas to support safe staffing levels.				
Equality Impact Assessment:	☐ Completed ☐ Not required	The levels recruited are supporting the monthly turnover only and not addressing the underlying vacancy factor. The Board of Directors is asked to note the contents of this report.				
This subject has previously been reported to:		Board of Dire Council of Go Audit Comm Executive Te Quality Assu Committee F&P Commit	overnors [ittee [am [rance [PP Committee SD Committee Charitable Funds Committee Nominations Committee Remuneration Committee Joint Negotiating Council Other		

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1.0 INTRODUCTION

1.1 As part of the ongoing monitoring of staffing levels, this paper presents to the Board of Directors a staffing report of actual staff in place compared to staffing that was planned, for the month of December 2017.

The Board of Directors is asked to note the contents of this report.

2.0 BACKGROUND

2.1 NHS England is not currently RAG (Red, Amber and Green) rating fill rates. A review of local organisations shows that fill rates of 90% and over are adopted with exception reports provided for those areas falling under this level.

December 2017	DAY	NIGHT
RN/RM Average Fill Rate	93.5%	95.0
Care Staff Average	100.8%	109.%
Fill Rate		

3.0 CURRENT SITUATION

3.1 RN/ RM vacancies.(This includes all Registered RN RM staff band 5 upwards)

Medicine and clinical support reports 68.59 WTE RN vacancies
Integrated Care reports 59.49 WTE RN vacancies
Surgery, Gastro, Critical care reports 34.96 WTE RN vacancies

Women children and Diagnostics reports 11.75 WTE RN/RM vacancies

Corporate services reports 12.87 WTE RN vacancies

Temporary Staffing December 2017

3.2 Temporary staffing has been broken down into business groups to enable the board to have clarity as regards percentages utilized. In previous months there has been a focus on the Emergency Department temporary staffing. In month they report 17% at RN grade and 15% non-registered care staff.

Business Group	RN	CARE STAFF
Medicine and Clinical support	16%	18%
Women Children and Diagnostics	2%	3%
Surgical & Critical Care and Gastro	7%	13%
Integrated Care	11%	16%

Recruitment

Local recruitment campaigns continue with monthly weekend recruitment open days for theatre practitioners and RNs. Event bright, Facebook, Instagram and twitter campaigns are also ongoing. NHS jobs adverts are placed continuously on a rolling basis. The central recruitment open day in December was, as anticipated, not as busy as usual with 3 RN and 3 students offered. A comprehensive plan has been submitted to the senior management group with a focus on a refreshed UK recruitment campaign for 2018. This will involve attendance at 9 student nurse job fairs and 6 general job fairs throughout not only the North West but through the Uk, including London, Dublin and Wales or Cumbria where other local Trusts report good numbers recruited. The refreshed 2018 'in search of' campaign will incorporate community and children's services to ensure a trust wide recruitment approach.

3.4 **Retention**

The Trust has joined cohort 2 of the NHSi (NHS Improvement) retention support program. A 90 day plan has been developed which is being submitted to NHSi prior to the site visit 22 January 2018 by NHSi to support and guide the Trust implement our retention recovery plan. The four initial worsktreams proposed will include the graduate nurse / student nurse programme , review of over 50's opportunities , career crossroads plan (known as itchy feet campaign) and a deep dive into the top 10 highest turnover areas.

The focus on retention of future newly qualified nurses that have received a job offer has been launched, with the Director of Nursing and Quality facilitating a student nurse event December 2017 which was well attended with 30 students. A monthly keeping in touch programme has now been developed for 2018 to support newly qualified nurses.

Work has commenced planning a new Graduate nurse program to support newly qualified staff that have already joined the Trust through their transition to practice. The first engagement event has taken place with very positive feedback.

A plan to fund 20 band 5 staff nurses to band 6 to improve retention was approved with interviews planned for the 10th February 2018 .(This opportunity will be open to external applicants too where the ward has band 5 vacancies)

4.0 Care hours per patient day (CHPPD)

December 2017 report also includes information relating to care hours per patient day (CHPPD). This is the staffing metric advised by the Carter review which aims to allow comparison between organisations to a greater extent than previously, whilst noting that location specific services (specialty centres for example) will influence the final measure. The CHPPD calculates the total amount of Nursing (RN and Care staff) available during a month, and divides this by the number of patients present on the in-patient areas at midnight. This gives an overall average for the daily care hours available per patient (all nursing and midwifery staff). During the Carter pilot stages, 25 trusts were included and their results showed CHPPD range from 6.3 to 15.48 CHPPD and a median of 9.13. For December 2017 our report shows an average CHPPD of 7.8

5.0 RISK & ASSURANCE

- 5.1 Safe staffing levels have been challenged by the levels of RN and RM vacancies at band 5. A reliance on temporary staffing has been required to support wards and departments safe staffing.
- 5.2 The acuity audit has been completed and figures are being validated. The results will be available for the January 18 board report.
- 5.3 The Director of Nursing and Quality and Associate Nurse Directors have implemented ward staffing guidelines along with an escalation in extremis policy with clear guidance as regards safe staffing levels.
- 5.4 Daily safety huddles (Monday Friday) are robustly attended chaired by the Director of Nursing and Quality or an Associate Nurse Director, to provide assurance as regards staffing levels.

6.0 CONCLUSION

Staffing levels have been maintained above an overall average of 90% with a number of areas reporting less than 90% staffing levels at RN/ RM , supported by temporary workers and non-registered care staff .

7.0 RECOMMENDATIONS

7.1 The Board of Directors are asked to note the contents of this report

Appendix A– Unify entry