

Report to:	Board of Directors	Date:	28 February 2018					
Subject:	Safe Staffing Repor	t						
Report of:	Chief Nurse	Prepared by:	Corporate Lead Nurse Workforce					
REPORT FOR INFORMATION								
Corporate objective ref:		Summary of Report  This report provides an overview of Registered Nurse (RN) and Registered Midwife (RM) staffing levels for the month of January 2018.						
Board Assurance Framework ref:		Key points of note are as follows:  RN and RM staffing vacancies across the Trust equates to 167 whole time equivalents.  Average fill rates for Registered staff, including RN and RM and non-registered care staff remains above 90% for both day and night duty  5 medical wards (A11, B4, A15, C4, E1), 3 surgical / gastroenterology wards (A1, D2, D1), 2 areas in child and family (neo-nates and the Birth Centre) 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.  The Board of Directors are asked to note the contents of this report.						
CQC Registration Standards ref:	Safe staffing							
Equality Impact Assessment:	☐ Completed ☐ Not required							
This subject has previously been reported to:		Board of Directors Council of Governors Audit Committee Executive Team Quality Assurance Committee F&P Committee	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 January 2018

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.

January 2018	DAY	NIGHT
RN/RM Average Fill Rate	91.20%	94.20%
Care Staff Average	99.30%	109.3%
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	73.39	WTE RN vacancies	
Integrated Care	reports	63.33	WTE RN vacancies
Surgery, Gastro, Critical care	reports	07.90	WTE RN vacancies
Women, Children and Diagno	10.67	WTE RN/RM vacancies	
Corporate Services reports		11.61	WTE RN vacancies

## 3.2 **Temporary Staffing January 2018**

Temporary staffing has been broken down into business groups to enable the board to have clarity as regards percentages utilised. In previous months there has been a focus on the Emergency Department temporary staffing. This month they reported 17% at RN grade and 13% non-registered care staff.

Business Group	RN	CARE STAFF
Medicine and Clinical support	18%	20%
Women Children and Diagnostics	2%	4%
Surgical & Critical Care and Gastro	8%	15%
Integrated Care	16%	15%

# 3.3 **Recruitment**

Local recruitment campaigns continue with monthly weekend recruitment open days for RNs. Event bright, Facebook, Instagram and twitter campaigns are also ongoing. NHS Jobs open day adverts are placed continuously on a rolling basis. The central recruitment open day in January generated 22 offers which was above average. The Trust attended its first student open day at Keele University which generated significant interest and subsequent attendance from prospective candidates at our open morning event the following week, confirming the strategy to recruit further afield is robust.

# 3.4 Retention

The Trust has joined Cohort 2 of the NHSi (NHS Improvement) retention support program.

The NHSi team visited in January and our formal plan has now been submitted. The four workstreams proposed have been launched. These are 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 launched in December 2017 continues to be well supported with 25 students attending our January 18 keeping in touch event.

Work has commenced planning a new Graduate Nurse programme to support newly qualified staff that has already joined the Trust through their transition to practice. The first engagement event has taken place with very positive feedback and the first workstream meeting held.

A plan to fund 20 band 5 staff nurses to band 6 to improve retention was approved with interviews planned for the 10<sup>th</sup> February 2018. All but 2 wards were recruited to at an extremely successful event.

Funding has been secured to recruit a full time E Roster clinical support lead (band 6) to assist with the roll out of safe care and to support ward managers with effective rostering, all with the aim to continue to support the wards to safe staff. The advert will go out in February 18.

## 4.0 Care hours per patient day (CHPPD)

4:1 January 2018 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 7.2

# 5.0 RISK & ASSURANCE

- 5.1 Safe staffing levels have been challenged by the levels of RN and RM vacancies at band 5, however it is noted that overall figures have reduced, and the numbers of vacant band 5 to 167 WTE this month from 187 WTE last month. A reliance on temporary staffing has been required to support wards and departments safe staffing.
- The acuity audit has been completed. 8 areas( A1, D6, Bluebell, E2, E3, A12, B6, A10), report 'red' scores which equates to an overall acuity rating indicating established staffing numbers need to be reviewed. The Chief Nurse and departmental Associate Nurse Directors are reviewing the information in their February staffing one to one meetings with ward managers. Two wards (B4 and C4) are being redone to check the accuracy in relation to level 2 patients. A11 was not undertaken in December and is being redone in February.
- The Chief Nurse and Associate Nurse Directors have implemented ward staffing guidelines along with an escalation in extremis policy with clear guidance as regards safe staffing levels. This will be presented to the People and Performance Committee in February 2018.

  Daily safety huddles (Monday Friday) are robustly attended chaired by the Chief Nurse, to provide assurance as regards staffing levels.

#### 6.0 CONCLUSION

6.1 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 is asked to note the contents of this report

# Fill rate indicator return Staffing: Nursing, midwifery and care staff

Org: RWJ - Stockport NHS Foundation Trust

Period: January\_2017-18

Night   Day   Night   Care Hours Per Patient Per Day (CHPPD)	nent
Hospital Site Details   Hosp	nent
Note	nent
Site code   Hospital Site name   Specialty 1   Specialty 2   Specialty 3   Specialty 4   Specialty	nent
Site code   Hospital Site name   Specialty 1   Specialty 2   planned staff hours   s	
RWJ09 STEPPING HILL HOSPITAL - RWJ09 Unit StepPing HILL HOSPITAL - RWJ09 STEPPING HILL HOSPIT	
RWJ09 STEPPING HILL HOSPITAL - RWJ09 Clinical Decisions Unit 300 - GENERAL MEDICINE 180 - ACCIDENT & EMERGENCY 372 372 372 372 372 372 341 341 341 100.0% 100.0% 100.0% 100.0% 100.0% 177 5.2 5.2 10.5  RWJ09 STEPPING HILL HOSPITAL - RWJ09 STEPPING HILL HOSPITAL - RWJ09 A3 320 - CARDIOLOGY 1423 1288 976.5 939 1023 759 682 682 97.8% 92.9% 92.2% 96.7% 692 3.2 2.2 5.4  RWJ09 STEPPING HILL HOSPITAL - RWJ09 A10 430 - GERIATRIC MEDICINE 2790 2212.5 2046 1954.5 2046 1364 1342 93.6% 112.7% 100.0% 125.0% 816 6.1 5.3 11.4	
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	w ays 2 Registered Nurses y Matrons to support safe
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to support winter escal	tion beds , staffing results his .
RWJ09 STEPPING HILL HOSPITAL - RWJ09 B6 300 - GENERAL MEDICINE 1209 1201.5 1069.5 1075.5 682 682 682 682 683 100.0% 100.0% 100.0% 100.0% 702 3.0 2.8 5.8  RWJ09 THE MEADOWS - RWJ88 Bluebell Ward 318- INTERMEDIATE CARE 1209 1209 2077 1897 682 682 682 682 671 100.0% 81.7% 100.0% 100.0% 763 2.6 3.3 5.9	
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RWJ09 STEPPING HILL HOSPITAL - RWJ09 C6 101 - UROLOGY 837 993 976.5 969.5 682 671 682 902 100.0% 97.5% 100.0% 100.0% 678 3.2 3.4 6.6 Increased Registered N	rses on shift to support
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w here required.	
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	acity requiring an additional I Unregistered care worker
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NVJU9   STEPTING TILLE FLOORING - NVJU9   Nebilalal Util   420 - PALEUN INC.   2529   1900   0   0   1027.5   1335.5   0   0   79.5%   11a   79.5%   11a   262   6.5   0.0   6.5   review ed daily by the Cl	nical Manager in order to
RWJ09 STEPPING HILL HOSPITAL - RWJ09 Tree House 420 - PAEDIATRICS 3255 3075 465 465 2170 1994 0 0 92.4% 100.0% 91.1% na 585 6.0 0.6 6.6	
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RWJ09 STEPPING HILL HOSPITAL - RWJ09 Delivery Suite 501 - OBSTETRICS 2790 2662.5 465 435 1860 1730 310 300 98.1% 91.7% 95.6% 70.0% 202 23.0 3.3 26.3	
RWJ09 STEPPING HILL HOSPITAL - RWJ09 Maternity 2 501 - OBSTETRICS 560- MIDWIFE LED CARE 1627.5 1605 930 877.5 620 620 310 230 98.6% 100.0% 100.0% 100.0% 414 4.4 2.4 6.8	
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