

Report to:	Board of Directors	Date:	25 th May 2017		
Subject:	Safe Staffing repor	t			
Report of:	Director of Nursing	and Midwifery Prepared by:	Deputy Director of Nursing and Midwifery (Acting)		
	F	REPORT FOR APPROVAL			
Corporate objective ref:		Summary of Report The report provides an overview by exception of actual versus planned staffing levels for the month of April 2017.			
Board Assurance Framework ref:		Key points of note are as follows; Average fill rates for Registered Nurses (RN) has increased to 91.9% in month. Average Care Staff rates remains above 100% to support Registered Nurse rates.			
CQC Registration Standards ref:		The Board is asked to note the contents of this report which highlights eight areas in Medicine with sub optimal RN staffing levels, one area in Surgery & Critical Care and one in Child & Family			
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 FSI Committee	Workforce & OD Committee BaSF Committee Charitable Funds Committee Nominations Committee Remuneration Committee Joint Negotiating Council Other		
Attachments		SafeStaffing_Apr17.	Internet version Apr17.xlsx		

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INTRODUCTION

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 April 2017. Work-streams to support safe staffing continue, with a monthly Safe staffing group chaired by the Director of Nursing and Midwifery.

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

2. BACKGROUND

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.

April 2017	DAY	NIGHT
RN/RM Average Fill Rate	91.9% ↑	95.0% ↔
Care Staff Average Fill Rate	106.0% ↑	117.6%↓

3.1 Medicine

The medicine business group is experiencing significant RN staffing issues on day duty. In April 2017, 8 wards reported sub-optimal RN staffing levels; of these, one ward reported between 80% and 90% RN levels, four wards report between 65% and 79% RN levels.

3.2 Surgery and Critical Care

Surgery and critical care business group's recruitment and retention programme is starting to show improved rates in all areas. The only ward that is not meeting the 90% rate is Ward M4 which in April reports 65 % RN staffing on days. All of the surgery and critical care wards are reporting safe night staffing levels above 90%.

3.3 Community

The community unit continues to cover some shifts with agency staff including off-framework agency. There has been a successful recruitment campaign for care staff and they are now at full complement at band 2. Band 6 RN vacancies continue to be a pressure within the business group, as recruits need to have specific qualifications to achieve a band 6.

3.4 Child and Family

Neonatal day duty and Treehouse continue to report below 90% which is sub-optimal. This is due to short term sickness and is being closely monitored by the Business Group. Safe Staffing 18 maintained by managing acuity and capacity within our networks across Greater Manchester

3.5 Recruitment and Retention

The open day on 29th April 17 was disappointing in that only 5 RNs were experienced and 3 students. 18 Care Staff were recruited for the wards and 5 of the 10 Enhanced Care Care Supports were recruited.

It is thought that the open day falling on a Bank Holiday may have adversely impacted on attendance.

Further open days and events are planned throughout the year.

Medicine reports 96wte vacancies RN with 34wte others, however these are not factored

in until we are sure recruits will start (many students accept 4 offers).

Care Support staff re +10wte over establishment.

To date 12 of the anticipated 60wte nurses from India have arrived. The two adaptation courses (converting Band 2 Care Staff trained in their country of origin to Band 5) are continuing. One third are failing to attend or complete the required level of self-directed study to attain a pass rate. Support has been increased, but it may be that these candidates will be removed from the course soon.

Local NHS hospitals in the North West are improving their offer to student nurses as regards pre-registration, banding and paying their initial NMC. Costings are now in place and a business case is being presented for consideration.

3.6 Care hours per patient day (CHPPD)

Of note the care hours per patient day has increased from 7.5 to 8.0 in the month. The care hours calculate the total amount of nursing (Registered and care staff) available during a month divided by the number of patients present on the inpatient areas at midnight. This gives an overall average for the daily care hours per patient day.

3.7 Temporary Staffing

We continued to book off-framework agency in April 2017 for the medical wards. Reliance on off framework agency has declined in month A12 has now closed. The total percentage of temporary staffing on the wards is 4.4%. The overall total which includes all nursing staff areas is 3.6%. In all areas Registered Nurse temporary staffing percentages have decreased since March 2017.

A specific focus on Emergency Department indicates of the 19% temporary workers 13% are NHSP, 6% Agency.

DEPARTMENT	APR 17	MAR 17	FEB 17	JAN 17	DEC 16	NOV 16
Medicine, ED and Wards	18%	21%	18%	17%	10.1%	10.7%
Registered Nurse						
temporary staffing						
Surgery & Critical Care	8%	12%	11%	12%	8.0%	7.2%
Registered Nurse						
temporary staffing						
ED Registered Nurse	19%	27%	26%	23%	20%	19%
temporary staffing						

4 RISK & ASSURANCE

4.1 Sub-optimal Registered Nurse levels are reported with a continued but reducing reliance on bank and agency staff, which has contributed to a day duty overall coverage of above 90% with 9 wards reporting below optimum levels.

Daily safety huddles and continuous support by the Heads of Nursing and Matrons, site managers, and Senior Nurse Managers and Executives continues to address this.

5. CONCLUSION

There is continued pressure on the Registered Nurse staffing levels across the wards and in particular in Medicine. Every effort is being made to provide sufficient numbers of staff to

	support the wards and departments.
6. 6.1	RECOMMENDATIONS The Board is asked to note the contents of the report

Appendix A – Previous months staffing fill rates

March 2017	DAY	NIGHT
RN/RM Average Fill Rate	89.0% ↓	95.0% ↓
Care Staff Average Fill Rate	103.0% 个	118.7%个
February 2017	DAY	NIGHT
RN/RM Average Fill Rate	90.80% ↓	96.1% ↔
Care Staff Average Fill Rate	101.7% 个	116.4%↓
Jan 2017	DAY	NIGHT
RN/RM Average Fill Rate	91.2% ↓	96.1% ↑
Care Staff Average Fill Rate	100%↓	117.5%↑
Dec 2016	DAY	NIGHT
RN/RM Average Fill Rate	93.3% ↓	95.7 % ↓
Care Staff Average Fill Rate	100.5% ↑	110.4% ↓
NOVEMBER 2016	DAY	NIGHT
RN/RM Average Fill Rate	93.4% ↑	97.3% ↑
Care Staff Average Fill Rate	99.3%↓	115.4%↓
OCTOBER 2016	DAY	NIGHT
RN/RM Average Fill Rate	93.0% ↑	95.6% ↑
Care Staff Average Fill Rate	101.3%↓	119.4%↑
SEPTEMBER 2016	DAY	NIGHT
RN/RM Average Fill Rate	92.4% ↑	95.5%↑
Care Staff Average Fill Rate	101.7%↓	116.9%↓
AUGUST 2016	DAY	NIGHT
RN/RM Average Fill Rate	91.9% ↑	95.3%↓
Care Staff Average Fill Rate	103.6%↓	117.2%↓
JULY 2016	DAY	NIGHT
RN/RM Average Fill Rate	90.5% ↓	96.6 % ↑
Care Staff Average Fill Rate	104.9% ↑	117.9% ↑
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June 2016	DAY	NIGHT
RN/RM Average Fill Rate	91.1%↓	95.7 % ↑

Care Staff Average Fill Rate	103.6%↓	114.3%↓

May 2016	DAY	NIGHT
RN/RM Average Fill Rate	91.9% ↑	95.2% ↓
Care Staff Average Fill Rate	106.3% ↓	125.1% ↑

April 2016	DAY	NIGHT
RN/RM Average Fill Rate	90.3%	95.7 % ↑
Care Staff Average Fill Rate	107.6% ↑	122.9% ↑