Nursing and Patient Experience
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Whittington Health NHS

Whittington Health Trust Board

1st October 2014

Title:	Safe Staffing (Nursing and Midwifery)		
Agenda item:	**14/148**	**Paper**	**8**
Action requested:	For information		
Executive Summary:	This paper summarises the monthly position on safe staffing for nursing. Key issues to note include: - Most areas had greater than 95 per cent staffing levels. - Two areas fell below 90 per cent but were covered by senior nursing staff (matrons, professional develop nurses, specialist nurses) working clinically. - Some areas were greater than 150 per cent, and this was attributed in the main to the use of specials. - There continues to be an emphasis on recruitment to vacancies. - A further establishment review will commence in October and report to the Board before the end of the year.		
Summary of recommendations:			
Fit with WH strategy:	Efficient and effective care. Francis Report recommendations Cummings recommendations NICE recommendations		
Reference to related / other documents:			
Reference to areas of risk and corporate risks on the Board Assurance Framework:	3.4 Staffing ratios versus good practice standards		
Date paper completed:	18 September 2014		
Author name and title:	**Alison Kett – Deputy Director of Nursing and Patient Experience**	**Director name and title:**	**Philippa Davies – Director of Nursing and Patient Experience**
Date paper seen by EC		**Equality Impact Assessment complete?**		**Risk assessment undertaken?**		**Legal advice received?**	

Safe Nurse Staffing Levels
August 2014

1.0 Purpose

To provide the Board with an overview of nursing and midwifery staffing levels on our wards in August 2014 and an assurance that these levels are monitored and managed daily.

2.0 Background

Whittington Health is committed to ensuring that levels of nursing staff, which include Registered Nurses (RNs), Registered Midwives (RMs) and Health Care Assistants (HCAs), match the acuity and dependency needs of patients within clinical ward areas in the hospital. This includes an appropriate level of skill mix of nursing staff to provide safe and effective care. These staffing levels are viewed along with reported outcome measures, 'registered nurse to patient ratios', percentage skill mix ratio of registered nurses to HCAs and the number of staff per shift required to provide safe and effective patient care.

As of June 2014, all hospitals with inpatient beds were required to publish their staff fill rates (actual versus planned) in hours, taking into consideration day and night shifts and registered and un-registered staff. This fill rate information appears on the NHS Choices website www.nhschoices.net. Fill rate data from 1st – 31st August 2014 for The Whittington Hospital has been uploaded and submitted on UNIFY.

Patients and the public are now able to see how hospitals are performing on this indicator on the NHS Choices website. This data sits alongside a range of other safety indicators.

Following NICE guideline publication, SG1- Safe staffing for nursing in adult inpatient wards in acute hospitals (July 2014), a gap analysis is being undertaken to determine action required.

3.0 Fill rate indicator return

As described above, the 'fill rate indicator return' was completed and submitted. A copy of the UNIFY submission is available on request and is available to view on the trust website.

The 'actual' number of staffing hours planned is taken directly from our nurse roster system, following which a look back exercise is undertaken. There were occasions when planned hours were revised either up or down taking into account an increase or reduction in patient bed numbers or changes in patient acuity. On occasions when there was a deficit in 'planned' hours versus 'actual' hours, staff were moved from other areas to ensure safe staffing levels across our hospital.

Appendix 1 details a summary of fill rates 'actual' versus 'planned' in August 2014.
Average fill rate range was between 90.9 - 111.4 per cent for registered staff and 95.5 – 267 per cent for care staff during the day and 96.80 - 132.3 per cent for registered staff and 91.4 - 219.4 per cent for care staff during the night.

Average fill rates in excess of 100 per cent can be accounted for and relate primarily to additional staff being booked during the night and day time to ensure that our most vulnerable patients which include elderly patients with severe dementia, those at high risk of falls and younger adults with acute mental health problems, received 1:1 care when necessary.

Additional registered nurses were, for example, also booked to care for patients discharged from intensive care who required higher levels of nurse input and to look after particularly challenging patients suffering from alcohol withdrawal.

In maternity during the month of August, there were periods of low clinical activity. Planned versus actual hours of health care assistants is recorded below 95 per cent, however the reduced activity within a number of shifts overall did not require the full planned staffing for the whole of the shift.

The average percentage of registered nurses on Victoria ward during the day was 90.9 per cent. Staffing was assessed against the dependency and acuity of patients on a daily basis by the Matron and Head of Nursing, and where necessary, mid shift when additional nursing hours were deemed to be required, senior nursing staff worked clinically to ensure safe staffing.

All patients who were identified as requiring 1:1 care 'specialling' are required to be risk assessed by a senior nurse prior to approval and the shift request sent to the Temporary Staffing Office for bank/agency cover.

4.0 'Real Time' management of staffing levels to mitigate risk

Safe staffing levels are reviewed and managed on a daily basis. At the 08.30am bed meeting, the Director of Nursing/Deputy Director of Nursing in conjunction with matrons, site managers and other senior staff review all registered and unregistered workforce numbers by ward. Consideration is given to bed capacity and operational activity within the hospital, which may impact on safe staffing. Actions are agreed to ensure that all areas are made safe.

We have agreed a process to rate a ward shift 'red' 'amber' or 'green' according to numbers of staff on duty, taking into account patient numbers, acuity and dependency. This detail will be presented in the future board reports, starting with September's data.

5.0 Conclusion

Trust Board members are asked to note the August UNIFY return position and processes in place to ensure safe staffing levels in the organisation.

Fill rate data - summary
August 2014

Day				Night				Average fill rate data- Day		Average fill rate data- Night	
Registered nurses/ midwives		Care staff		Registered nurses/ midwives		Care staff		Registered nurses/ midwives	Care staff	Registered nurses/ midwives	Care staff
Planned	Actual	Planned	Actual	Planned	Actual	Planned	Actual	101.1%	124.8%	104.1%	127.9%
29,359 hours	29,684 hours	8,681 hours	10,833 hours	23,790 hours	24,759 hours	5,738 hours	7,336 hours				