

Report to:	Board of Directors				
Date of Meeting:	24 th September 2014				
Report Title:	Nursing & Midwifery Staffing Exception Report (July 2014)				
Status:	For information	Discussion	Assurance	Approval	Regulatory requirement
Mark relevant box with X	X		X		
Prepared by:	Debra Fairley, Deputy Director of Nursing				
Executive Sponsor (presenting):	Rob Dearden, Director of Nursing				
Appendices (list if applicable):	UNIFY spreadsheet				

Purpose of the Report
<p>This is the nursing and midwifery staffing exception report for July 2014 in response to the publication of <i>Hard Truths: Putting Patients First</i> (Department of Health, 2014).</p> <p>The aim of the report is to inform the Board about nursing and midwifery staffing capacity and capability in relation to agreed establishments and to provide assurance that concerns and potentially unsafe staffing levels are escalated and dealt with promptly.</p>

Key points for discussion
<p>Each month, staffing data are collected and analysed in order to establish how the number of actual staff on duty for both registered nurses/midwives and care workers compares to the planned staffing level. The data is uploaded onto UNIFY by the required deadline and is displayed on NHS Choices. Following last month's publication, no national RAG rating has been issued and the Trust has not received any adverse publicity in relation to its staffing levels reported for July 2014.</p> <p>For the purpose of this report, exceptions were identified if the 'fill rates' for both registered staff and health care support workers were below 90 per cent.</p> <p>To note: care staff are referred to as health care support workers (HCSW). The following wards were highlighted for discussion.</p>

Ward 1: the ward is staffed for 18 beds and to manage the ambulatory stream, but has been operating with 27 beds (used as 'escalation beds' throughout June and July). As a result, the ward has booked additional bank and agency staff/overtime, which accounts for the 'overstaffing picture' against the planned establishment for 18 beds.

Ward 4: the ward is experiencing some vacancies (4.8 WTE qualified nurses, including those being recruited to for the 'winter ward'). The number of Band 2 HCSW is presently over-established.

Ward 9: As reported last month, the ward still has approximately 3.85 WTE vacancies – recruitment has taken place and start dates are being confirmed. Several WTE remain on maternity leave, sick leave and secondment (4 WTE in total). This has been offset by an increased fill rate of HCSW. As highlighted last month, the ward has a funded establishment for 25 beds, although it has been open to 30 beds since November 2013. Staffing levels have recently been evaluated using the *Safer Nursing Care Tool*, which has demonstrated a shortfall of around 9 WTE – clinical judgment supports the increase in establishment of around 5.5 WTE. Following discussions at the Clinical Executive Group on 28.7.14, seven staff are now being recruited. This is being funded non-recurrently.

Ward 14: the vacancies reported last month have been filled and we await confirmation of start dates. Unfortunately two members of staff are about to leave to take up employment elsewhere in the Trust and three WTE are now on maternity leave. The skill mix in the surgical bed base is being reviewed to help provide assistance to the ward. A senior nurse has been seconded to the vacant band 7 senior sister's post (to cover Band 7 maternity leave).

Ward 16: the shortfall associated with HCSW is mainly due to the low numbers employed on the ward (four staff in total) and the fact that they had annual leave during June, which is not routinely backfilled. This did not cause any significant concerns.

Ward 18: as reported last month the ward continued to experience some sickness absence. No significant issues or concerns were reported during July.

Ward 19: the shortfall associated with HCSW is mainly due to the low numbers employed on the ward. This did not cause any significant concerns.

Recommendations

There were no significant staffing issues or associated concerns reported for July 2014. An active recruitment campaign continues within the Medical Group.

Action required by the Board of Directors

The Board is asked to note the key points set out in this paper and the actions in place to mitigate any risks to the quality of patient care.

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

Org: RCF Airedale NHS Foundation Trust
Period: July_2014-15

Please provide the URL to the page on your trust website where your staffing information is available

<http://www.airedale-trust.nhs.uk/nursing-and-midwifery-staffing/>

Hospital Site Details		Ward name	Main 2 Specialties on each ward		Day				Night				Day		Night	
					Registered midwives/nurses		Care Staff		Registered midwives/nurses		Care Staff		Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)
Site code *The Site code is automatically populated when a Site name is selected	Hospital Site name		Specialty 1	Specialty 2	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours				
RCF22	Airedale General Hospital - RCF22	ALS	501 - OBSTETRICS	501 - OBSTETRICS	2171.5	2100.5	426	426	2232	2232	372	372	96.7%	100.0%	100.0%	100.0%
RCF22	Airedale General Hospital - RCF22	ANU	420 - PAEDIATRICS	420 - PAEDIATRICS	1140	1158	174	78	984	984	132	132	101.6%	44.8%	100.0%	100.0%
RCF22	Airedale General Hospital - RCF22	Ward 01	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1162.5	1202	774	998.5	775	800	387.5	775	103.4%	129.0%	103.2%	200.0%
RCF22	Airedale General Hospital - RCF22	Ward 02 - AMU	326 - ACUTE INTERNAL MEDICINE	326 - ACUTE INTERNAL MEDICINE	1937.5	1983.5	1162.5	1310	1550	1568.5	775	812.5	102.4%	112.7%	101.2%	104.8%
RCF22	Airedale General Hospital - RCF22	Ward 04	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1753	1547	1906.8	1787.8	723	698.5	1126.48	1092.75	88.2%	93.8%	96.6%	97.0%
RCF22	Airedale General Hospital - RCF22	Ward 05	300 - GENERAL MEDICINE	314 - REHABILITATION	1663	1573	1482.5	1383	1046.25	995	697.5	697.5	94.6%	93.3%	95.1%	100.0%
RCF22	Airedale General Hospital - RCF22	Ward 06	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1526.5	1476	1443.3	1378.5	753.75	742.5			96.7%	95.5%	98.5%	
RCF22	Airedale General Hospital - RCF22	Ward 07	300 - GENERAL MEDICINE	430 - GERIATRIC MEDICINE	1638	1613.5	961.5	1007	787.5	742.5	742.5	810	98.5%	104.7%	94.3%	109.1%
RCF22	Airedale General Hospital - RCF22	Ward 09	110 - TRAUMA & ORTHOPAEDICS	110 - TRAUMA & ORTHOPAEDICS	1700	1415.75	1355.5	1199	697.5	708.75	1046.25	1057.5	83.3%	88.5%	101.6%	101.1%
RCF22	Airedale General Hospital - RCF22	Ward 13	100 - GENERAL SURGERY	502 - GYNAECOLOGY	1503.5	1386.5	757	1004.5	697.5	697.5	686.25	675	92.2%	132.7%	100.0%	98.4%
RCF22	Airedale General Hospital - RCF22	Ward 14	100 - GENERAL SURGERY	101 - UROLOGY	1590.5	1351.5	1057.5	915	697.5	697.5	697.5	686.25	85.0%	86.5%	100.0%	98.4%
RCF22	Airedale General Hospital - RCF22	Ward 16	300 - GENERAL MEDICINE	430 - GERIATRIC MEDICINE	2495.5	2378	713	500.5	2495.5	2373.5	0	0	95.3%	70.2%	95.1%	
RCF22	Airedale General Hospital - RCF22	Ward 17	420 - PAEDIATRICS	420 - PAEDIATRICS	1614	1578	696	690	1116	1116	108	108	97.8%	99.1%	100.0%	100.0%
RCF22	Airedale General Hospital - RCF22	Ward 18	110 - TRAUMA & ORTHOPAEDICS	110 - TRAUMA & ORTHOPAEDICS	954	770	636	443	652.5	630	67.5	90	80.7%	69.7%	96.6%	133.3%
RCF22	Airedale General Hospital - RCF22	Ward 19	303 - CLINICAL HAEMATOLOGY	110 - TRAUMA & ORTHOPAEDICS	835	835.5	553	549	697.5	697.5	0	0	100.1%	99.3%	100.0%	
RCF22	Airedale General Hospital - RCF22	Ward 21	501 - OBSTETRICS	420 - PAEDIATRICS	759	759	372	374	744	739	372	372	100.0%	100.5%	99.3%	100.0%
RCF30	Castleberg Hospital - RCF30	CCR	300 - GENERAL MEDICINE	314 - REHABILITATION	437.5	454.25	858.5	841.75	360	372	384	384	103.8%	98.0%	103.3%	100.0%

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Mark relevant box with X	X		X		
Prepared by:	Linda Beckett and Lisa Dixon Senior Matrons.				
Executive Sponsor (presenting):	Rob Dearden, Director of Nursing				
Appendices (list if applicable):	UNIFY spreadsheet				

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Key points for discussion
<p>Each month, staffing data are collected and analysed in order to establish how the number of actual staff on duty for both registered nurses/midwives and care workers compares to the planned staffing level. The data is uploaded onto UNIFY by the required deadline and is displayed on NHS Choices. Following last month's publication, no national RAG rating has been issued and the Trust has not received any adverse publicity in relation to its staffing levels reported for July 2014.</p> <p>For the purpose of this report, exceptions were identified if the 'fill rates' for both registered staff and health care support workers were below 90 per cent.</p> <p>To note: care staff are referred to as health care support workers (HCSW). The following wards were</p>

highlighted for discussion.

Ward 1: the ward is staffed for 18 beds and to manage the ambulatory stream, but has been operating with 27 beds (used as 'escalation beds' throughout June, July and August)

Ward 5: The ward has had periods during the month where both qualified and HCSW percentages have dropped below 90%. The ward has continuing sickness amongst the qualified establishment together with a qualified member of staff commencing maternity leave. The ward has sickness within the HCSW establishment and this has added to gaps presented by the vacancies at Band 2. These vacancies have been recruited to and the ward is waiting start dates for staff. There has been a reduction in fill rates for ward 5 for bank staff, but the ward have been supported by HASU staff and the medical unit in general. Ward 5 at times has had vacant beds and where patient safety and staffing has allowed, ward 5 have been able to support other areas that are experiencing staffing deficits.

Ward 9: As reported last month, the ward still has approximately 3.85 WTE vacancies – recruitment has taken place and start dates are being confirmed. Several WTE remain on maternity leave, sick leave and secondment (4 WTE in total). This has been offset by an increased fill rate of HCSW. As highlighted last month, the ward has a funded establishment for 25 beds, although it has been open to 30 beds since November 2013. Staffing levels have recently been evaluated using the *Safer Nursing Care Tool*, which has demonstrated a shortfall of around 9 WTE – clinical judgment supports the increase in establishment of around 5.5 WTE. Following discussions at the Clinical Executive Group on 28.7.14, seven staff are now being recruited. This is being funded non-recurrently. Recruitment is ongoing for the additional staff. Obviously we will not put all the newly recruited people into Ward 9 but will spread them across the Surgical wards in order to ensure the correct skill mix and experience is present in all the areas

Ward 13; The shortfall in the % fill rate for HCSW was due to sickness in this group of staff. However the ward staff did not feel that the ward was unsafe as they also had the resources of Clinical Nurse specialists to pull on and assist them with Nursing cares when necessary.

Ward 14: The vacancies have now been filled and awaiting start dates. Unfortunately two members of staff are about to leave to take up employment elsewhere in the Trust and three WTE are now on maternity leave.

Ward 16: the shortfall associated with HCSW is mainly due to the low numbers employed on the ward (four staff in total) and the fact that they had annual leave during August, which is not routinely backfilled. This did not cause any significant concerns.

Ward 18: as reported last month the ward continued to experience some sickness absence. No significant issues or concerns were reported during August. Although the % of the staff fill rate is at 70% and 63% due to holidays of the consultants throughout August the ward has been fairly quiet the staffing was safe. At times there were only 6 patients on the ward and therefore did not require the planned hours of staff that would be required for 16 patients which is the ward's maximum capacity and for which the ward has an establishment for.

Recommendations

There were no significant staffing issues or associated concerns reported for August 2014. A continuing recruitment drive is ongoing within the groups.

Action required by the Board of Directors

The Board is asked to note the key points set out in this paper and the actions in place to mitigate any risks to the quality of patient care.

Org: RCF Airedale NHS Foundation Trust
 Period: August_2014-15

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

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Site code *The Site code is automatically populated when a Site name is selected	Hospital Site name		Specialty 1	Specialty 2	Registered midwives/nurses	Care Staff	Registered midwives/nurses	Care Staff	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)				
RCF22	Airedale General Hospital - RCF22	ALS	501 - OBSTETRICS	501 - OBSTETRICS	2065.5	2022	378	354	2232	2160	372	360	97.9%	93.7%	96.8%	96.8%
RCF22	Airedale General Hospital - RCF22	ANU	420 - PAEDIATRICS	420 - PAEDIATRICS	1110	1074	156	144	1044	1044	72	72	96.8%	92.3%	100.0%	100.0%
RCF22	Airedale General Hospital - RCF22	Ward 01	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1162.5	1076.5	771	906.2	771	771	387.5	708.5	92.6%	117.5%	100.0%	182.8%
RCF22	Airedale General Hospital - RCF22	Ward 02 - AMU	326 - ACUTE INTERNAL MEDICINE	326 - ACUTE INTERNAL MEDICINE	1932.5	1876	1181.25	1184.75	1550	1535.5	775	787.5	97.1%	100.3%	99.1%	101.6%
RCF22	Airedale General Hospital - RCF22	Ward 04	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1427.5	1386	1591.75	1510.25	731.25	731.25	1035	1012.75	97.1%	94.9%	100.0%	97.9%
RCF22	Airedale General Hospital - RCF22	Ward 05	300 - GENERAL MEDICINE	314 - REHABILITATION	1858.65	1643.65	1375.25	1330.25	1034.75	1001	708.75	675	88.4%	96.7%	96.7%	95.2%
RCF22	Airedale General Hospital - RCF22	Ward 06	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1414.45	1401.45	1292.5	1249.5	708.75	720	1046.25	1068.75	99.1%	96.7%	101.6%	102.2%
RCF22	Airedale General Hospital - RCF22	Ward 07	300 - GENERAL MEDICINE	430 - GERIATRIC MEDICINE	1546.85	1515.35	1017	993.5	742.5	742.5	720	731.25	98.0%	97.7%	100.0%	101.6%
RCF22	Airedale General Hospital - RCF22	Ward 09	110 - TRAUMA & ORTHOPAEDICS	110 - TRAUMA & ORTHOPAEDICS	1702.5	1422	1385.6	1268	697.5	697.5	1034.75	1046	83.5%	91.5%	100.0%	101.1%
RCF22	Airedale General Hospital - RCF22	Ward 13	100 - GENERAL SURGERY	502 - GYNAECOLOGY	1413	1392	700	573.5	701.5	701.5	697.5	675	98.5%	81.9%	100.0%	96.8%
RCF22	Airedale General Hospital - RCF22	Ward 14	100 - GENERAL SURGERY	101 - UROLOGY	1603	1335	1127	984.5	697.5	697.5	697.5	787.5	83.3%	87.4%	100.0%	112.9%
RCF22	Airedale General Hospital - RCF22	Ward 16	300 - GENERAL MEDICINE	430 - GERIATRIC MEDICINE	2495.5	2292.5	713	452	2495.5	2380.5	0	0	91.9%	63.4%	95.4%	-
RCF22	Airedale General Hospital - RCF22	Ward 17	420 - PAEDIATRICS	420 - PAEDIATRICS	1554	1530	582	582	1116	1116	0	0	98.5%	100.0%	100.0%	-
RCF22	Airedale General Hospital - RCF22	Ward 18	110 - TRAUMA & ORTHOPAEDICS	110 - TRAUMA & ORTHOPAEDICS	924	654.5	646.5	408	607.5	562.5	90	123.75	70.8%	63.1%	92.6%	137.5%
RCF22	Airedale General Hospital - RCF22	Ward 19	303 - CLINICAL HAEMATOLOGY	110 - TRAUMA & ORTHOPAEDICS	826	828	573.5	538.95	695.5	695.5	0	0	100.2%	94.0%	100.0%	-
RCF22	Airedale General Hospital - RCF22	Ward 21	501 - OBSTETRICS	420 - PAEDIATRICS	781.5	781.5	372	342	744	744	372	372	100.0%	91.9%	100.0%	100.0%
RCF30	Castleberg Hospital - RCF30	CCR	300 - GENERAL MEDICINE	314 - REHABILITATION	470	499.5	838.75	825.25	372	408	372	372	106.3%	98.4%	109.7%	100.0%