

Report to:	Board of Directors				
Date of Meeting:	29 th October 2014				
Report Title:	Nursing & Midwifery Staffing Exception Report (for September 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 September 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 September 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>

Neonatal Unit: despite the shortfall in HCSW, lower activity levels meant that this had minimal impact. The unit still has 2.47 WTE vacancies, presently out to recruitment.

Ward 5: the ward has experienced some short and long term sickness at all grades, but it is envisaged that this will improve when the band 6 sister returns to work on a phased return. There are no registered nurse vacancies and one HCSW (band 3) vacancy, which will be filled by relocating a member of staff from Ward 4.

Ward 9: recruitment to the vacant posts continues, with interviews already scheduled. The ward continues to operate with 25 beds, increasing to 30 as required. Staff for the additional beds were requested – the night shifts were easier to ‘cover’ than the day shifts, which might explain the shortfall during the day.

Ward 14: despite requests, the ward was not able to fill their staffing requirements for the day shifts. Presently, there are two members of staff on maternity leave and one registered nurse vacancy. Where the ward has been unable to gain help from the bank/agency for a registered nurse, a HCSW has been employed instead.

Ward 17: the shortfall associated with HCSW is mainly due to the fact that there are only two HCW employed within the Children’s Unit and any gaps caused by annual leave or sickness are not routinely filled.

Ward 18: the ward continues to experience a shortfall in staffing. A small number of night shifts have been staffed with only one registered nurse (instead of two) and, where possible, an extra HCSW has been employed. The ward continues to run with staffing problems: three members of staff are on secondment; two are on sick leave; and 0.8WTE vacancy remains unfilled. The matron has provided assurance that despite the challenges presented by these vacancies, the service continues to run safely and should any concerns arise, these are escalated so that staff can be relocated from other wards/departments as necessary.

Recommendations

Staffing shortfalls did not raise any significant issues during September: the matrons continued to work as a team to deal with any escalated matters and to relocate staff as required.

Despite a continued recruitment campaign throughout September, registered nurse applications were low in number, resulting in low recruitment.

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: September_2014-15

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

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/>

Only complete sites your
 organisation is accountable
 for

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	2044.5	1926	384	366	2160	2112	360	360	94.2%	95.3%	97.8%	100.0%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	ANU	420 - PAEDIATRICS	420 - PAEDIATRICS	1116	1068	102	78	888	864	192	192	95.7%	76.5%	97.3%	100.0%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 01	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1105	1121	850	862	762.5	766.5	587.5	737.5	101.4%	101.4%	100.5%	125.5%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 02 - AMU	326 - ACUTE INTERNAL MEDICINE	326 - ACUTE INTERNAL MEDICINE	1875	1847	1125	1194.5	1500	1442	750	775	98.5%	106.2%	96.1%	103.3%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 04	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1529.75	1465.25	1472	1427.5	686	686	1136.25	1136.25	95.8%	97.0%	100.0%	100.0%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 05	300 - GENERAL MEDICINE	314 - REHABILITATION	1808.5	1526	1242	1159.5	1000.95	944.7	692.5	720.5	84.4%	93.4%	94.4%	104.0%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 06	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1364	1313	1378	1294.5	675	675	1012.5	978.75	96.3%	93.9%	100.0%	96.7%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 07	300 - GENERAL MEDICINE	430 - GERIATRIC MEDICINE	1520.5	1452.5	981.5	966.5	765	731.25	618.75	652.5	95.5%	98.5%	95.6%	105.5%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 09	110 - TRAUMA & ORTHOPAEDICS	110 - TRAUMA & ORTHOPAEDICS	1638	1377.5	1431	1261	675	679	1034.75	1012.5	84.1%	88.1%	100.6%	97.8%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 13	100 - GENERAL SURGERY	502 - GYNAECOLOGY	1284	1241	625.5	581	675	675	675	675	96.7%	92.9%	100.0%	100.0%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 14	100 - GENERAL SURGERY	101 - UROLOGY	1575	1397.5	1125	897	675	675	675	708.75	88.7%	79.7%	100.0%	105.0%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 16	300 - GENERAL MEDICINE	430 - GERIATRIC MEDICINE	2415	2279	690	515	2415	2323	0	0	94.4%	74.6%	96.2%	-
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 17	420 - PAEDIATRICS	420 - PAEDIATRICS	1500	1428	618	498	1080	1056	84	48	95.2%	80.6%	97.8%	57.1%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 18	110 - TRAUMA & ORTHOPAEDICS	110 - TRAUMA & ORTHOPAEDICS	875	750.5	605.5	338	607.5	585	67.5	90	85.8%	55.8%	96.3%	133.3%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 19	303 - CLINICAL HAEMATOLOGY	110 - TRAUMA & ORTHOPAEDICS	762	757	589.5	587.5	674.5	674.5	2	2	99.3%	99.7%	100.0%	100.0%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 21	501 - OBSTETRICS	420 - PAEDIATRICS	742.5	742.5	360	360	720	720	360	360	100.0%	100.0%	100.0%	100.0%
RCF30	CASTLEBERG HOSPITAL - RCF30	CCR	300 - GENERAL MEDICINE	314 - REHABILITATION	475	506.5	799.25	777.75	360	360	360	360	106.6%	97.3%	100.0%	100.0%