

Report to:	Board of Directors				
Date of Meeting:	25 March 2015				
Report Title:	Nursing and Midwifery Staffing Exception Report (for February 2015)				
Status:	For information	Discussion	Assurance	Approval	Regulatory requirement
Mark relevant box with X	X		X		
Prepared by:	Lisa Dixon, Senior Matron, Medicine				
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 <i>February 2015</i> 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 information
<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.</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> <p>Ward 1: The staffing establishment for Ward 1 is calculated for 18 beds so there was reliance upon bank and agency staff to 'cover' the shifts for an increase in the number of beds during February: for the most part this was achieved. Support was also provided from the other wards when it was safe to do so. The ward has experienced HCSW sickness during February which mainly accounts for the deficits which were not filled by bank or agency.</p> <p>Ward 4: The ward is fully established at the moment and the team reports a small amount of on-going sickness. The shortfall in RN during the day was due to the fact that staff were relocated to work in other wards (usually ward 1 or Ward 10).</p> <p>Ward 5: The ward continues to experience some short and long term sickness absence at all grades with a further two members of staff having supported practice on other medical wards. The Band 7 sister commenced a six month secondment during the latter part of February. A number of staff are commencing phased returns from sickness and this should improve the ward position. Where qualified deficits are identified and bank and agency fail to fill the shifts additional HCSW support has been sought.</p>

Ward 6: The ward experienced a slight shortfall associated with both qualified and HCSW sporadically during the day and night shifts. The ward has been carrying 3 qualified vacancies for a number of months despite active recruitment efforts.

Ward 9: The ward continued to experience staffing shortfalls throughout February due on-going vacancies. Additional measures put in place to support the team were maintained throughout February. Bank and agency were used where possible to fill vacant shifts. The ward had five DOLS patients in their care during February which accounts for the additional HCSW staff overnight.

Ward 13: The ward experienced a slight shortfall in RN during the day, but no significant concerns were reported by the matron. Bank and agency not always providing cover for the shifts.

Ward 14: The ward experienced a slight shortfall in both qualified and unqualified day and night but no significant concerns reported by the matron. The ward are currently supporting the winter ward with both a qualified and an unqualified member of staff. Bank and agency not always providing cover for the shifts.

Ward 16: As per last month, the shortfall associated with HCSW was mainly due to the fact that the unit employs only four HCSW and currently the ward has a Band 2 vacancy leaving the unit with no support staff at times. The ward, when activity has allowed, have provided HCSW support to the wards, sometimes leaving no HCSW on the unit.

The Neonatal Unit and Ward 17: The matron reports that the deficits are the shifts that they were unable to cover due to absence within the team. The unit is working to try and build up their paediatric bank to prevent such situations.

Ward 18 (Haematology/Surgery/Medical): The ward remained relocated during February and continued to have an additional eleven beds open as part of the winter escalation. The ward is usually established for eleven single rooms. No significant concerns were raised by the matron during February.

Ward 19 (Elective Orthopaedic ward): The ward remained relocated during February. Matron reports that only one qualified may have been required due to the number of patients on the ward with the additional staff member moved to support other wards.

Ward 21: The ward experienced a shortfall in HCSW during the day and night shifts. This was due to sickness absence, vacancies and maternity leave. The vacant posts have now been recruited to.

Winter Ward (10): The ward – operating with 30 beds – is staffed and continues to be staffed with RN and HCSW allocated from other inpatient wards and well as the use of bank and agency. A core number of agency nurses from Hallam agency have provided continuity to the ward. The medical unit is working closely with Hallam agency to reallocate qualified and unqualified staff appropriately to fill the deficits.

Harden Ward: The February Safe staffing report for Harden Ward provides a different picture than previous months. This is due to the fact that bed numbers on Harden Ward were increased from 10 - 15 as part of the winter plan from 1 January 2015, however by 11 February it was proving difficult to secure the staff via bank or agency to support the additional beds. This being the case and to maintain safe staffing levels for the core 10 beds, admissions to the winter beds were suspended for the remainder of February and a decision to reduce bed numbers back to 10 taken from 1 March 2015 as bed pressures across the system eased. The ward has experienced short-term sickness throughout February.

The Safe staffing report night average fill rates for care staff of 50% reflects the on-going attempts to staff the additional winter beds not the actual staffing levels in place for the core 10 beds which were at a safe level. It is anticipated that the March report will reflect a clearer picture without winter beds.

Recommendations

February saw a sustained overall activity, with a continued increase in the number of beds required to meet activity demands. Additional capacity was provided via the winter ward, Ward 1 (ACU) and the relocation of Ward 19 (hematology) to Ward 18.

The matrons reported that there were increased pressures in ensuring that all wards and departments had the necessary RN and HCSW to meet the needs of highly dependent and acutely ill patients. The number of DOLS patients has been and continues to be a challenge to the wards to manage.

The increase in activity with the corresponding increase in the number of beds presented significant challenges in ensuring that all wards had the necessary safe staffing levels. Where there were shortfalls, overall, this was actively managed with timely assessment of any risks with staff relocated as necessary by the matrons. Matrons, also, worked clinically within their wards to support their teams.

In terms of recruitment, this is continuing as reported previously. The staffing establishments are presently being reviewed in line with the recent staffing audit (using the *Safer Nursing Care Tool*) and a full report will be prepared in due course.

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

RCF Airedale NHS Foundation Trust

February_2014-15

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

(Please can you ensure that the URL you attach to the spreadsheet is correct and links to the correct web page and include 'http://' in your URL)

<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	Labour Suite	501 - OBSTETRICS	501 - OBSTETRICS	1896	1829.5	336	336	2004	1944	336	336	96.5%	100.0%	97.0%	100.0%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Neonatal Unit	420 - PAEDIATRICS	420 - PAEDIATRICS	926.5	920.5	144	144	864	864	144	120	99.4%	100.0%	100.0%	83.3%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 01	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1081.2	1001.75	977.5	785.75	644	759	644	652.3	92.7%	80.4%	117.9%	101.3%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 02 - AMU	326 - ACUTE INTERNAL MEDICINE	326 - ACUTE INTERNAL MEDICINE	1837.5	1815	1112.5	1135	1550	1600	800	812.5	98.8%	102.0%	103.2%	101.6%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 04	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1408.5	1287.5	1167.5	1108	708.75	686.25	888.75	911.25	91.4%	94.9%	96.8%	102.5%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 05	300 - GENERAL MEDICINE	314 - REHABILITATION	1405	1262.5	1182.5	1148.5	832.5	798.75	720	731.25	89.9%	97.1%	95.9%	101.6%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 06	430 - GERIATRIC MEDICINE	300 - GENERAL MEDICINE	1309.45	1253.5	1202.75	1109.05	630	630	956.25	911.25	95.7%	92.2%	100.0%	95.3%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 07	300 - GENERAL MEDICINE	430 - GERIATRIC MEDICINE	1264	1250.5	931.75	1253.25	641.25	652.5	663.75	663.75	98.9%	134.5%	101.8%	100.0%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 09	110 - TRAUMA & ORTHOPAEDICS	110 - TRAUMA & ORTHOPAEDICS	1737.5	1444	1607.5	1393.5	630	630	1033.75	1156.2	83.1%	86.7%	100.0%	111.8%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 13	100 - GENERAL SURGERY	502 - GYNAECOLOGY	1250.5	1231	774.5	683	630	630	630	630	98.4%	88.2%	100.0%	100.0%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 14	100 - GENERAL SURGERY	101 - UROLOGY	1250	1179	957.5	891.5	776.25	787.5	686.25	682.5	94.3%	93.1%	101.4%	99.5%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 16	300 - GENERAL MEDICINE	430 - GERIATRIC MEDICINE	2254	2042.5	644	335.5	2254	2079.5	0	0	90.6%	52.1%	92.3%	-
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 17	420 - PAEDIATRICS	420 - PAEDIATRICS	1290	1332	636	594	1008	1002	96	60	103.3%	93.4%	99.4%	62.5%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 18	110 - TRAUMA & ORTHOPAEDICS	110 - TRAUMA & ORTHOPAEDICS	1018	831	988	808	630	666.75	566.25	448	81.6%	81.8%	105.8%	79.1%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 19	303 - CLINICAL HAEMATOLOGY	110 - TRAUMA & ORTHOPAEDICS	744.5	634.5	553	451	530.25	530.25	90	90	85.2%	81.6%	100.0%	100.0%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Ward 21	501 - OBSTETRICS	420 - PAEDIATRICS	672	672	336	298	672	672	336	288	100.0%	88.7%	100.0%	85.7%
RCF30	CASTLEBERG HOSPITAL - RCF30	Harden Ward	300 - GENERAL MEDICINE	314 - REHABILITATION	713.5	726.5	661.25	649.75	336	348	672	408	101.8%	98.3%	103.6%	60.7%
RCF22	AIREDALE GENERAL HOSPITAL - RCF22	Winter Ward	300 - GENERAL MEDICINE	430 - GERIATRIC MEDICINE	1218	963.5	882	1007.25	630	978.81	630	690.99	79.1%	114.2%	155.4%	109.7%
Total					23276.15	21676.75	15094.25	14131.05	15971	16259.31	9893	9591.99				