

Document Title:	Trust Assurance Report Section 5: Director of Nursing/Chief Operating Officer
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Safer Staffing Monthly Exception Report

Summary

This is the safer staffing report for publication of December 2014 data, on both the NHS Choices website and the Trust's website.

The report details monthly planned (our budgeted and expected staffing) against actual nursing staff fill rates for registered and unregistered nurse staffing, by day and night shifts; no other professional group of staff is to be included.

Trust Boards are to receive this published data monthly, advised, by exception, of those wards where staffing levels fall short of planned numbers. The report details cause and effect and the actions planned to address the shortfall.

The December data demonstrates an overall improvement in fill rates with fewer units rated either red or amber

Overall fill rates for inpatient areas remains consistent at over 110% (Table 2)

Fill rates for registered nurses in the day have shown continuing improvement and now remain stable at around 100%

Fill rates for registered nurses at night reached the 100% target during October and remain stable (Table 2)

The overall day fill rates for the Trust are moving towards the target for registered and unregistered staff (Table 2a)

Key Reporting Issues

The ongoing development of this report and limitation of electronic systems necessitates a degree of manual collection and manipulation of data.

The monthly reporting requirements set out by the National Quality Board dictate that there is a very narrow timeline for data to be validated and submitted for publication.

Recommendation

The Trust Board is asked to:

- Endorse the Safe Staffing Exception Report

December Data Reporting

There has been no national requirement to RAG rate this data in respect of any shortfalls, or indeed any oversupply, although further guidance on this and tolerance rates are expected in due course.

Internal RAG rating	
Red	0-80%
Amber	80-90%
Green	> 90%

Table 1 - Nurse Staffing Fill Rates by Ward and by Grade Type: December 2014

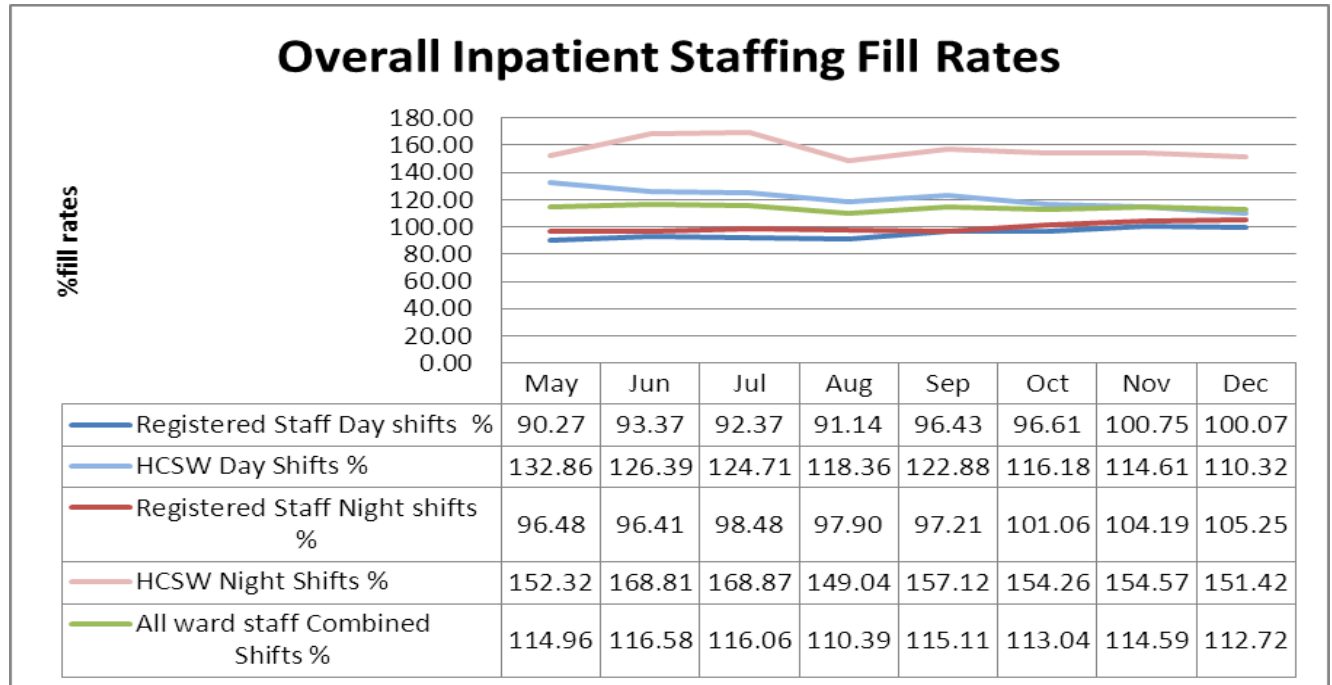
Ward	Speciality	Day		Night		Number of Beds per Ward	% Bed Occupancy (Excluding leave)
		Average Fill Rate - Registered Nurses (%)	Average Fill Rate - Care Staff (%)	Average Fill Rate - Registered Nurses (%)	Average Fill Rate - Care Staff (%)		
Newport House	Forensic	80.67	139.12	112.72	137.89	8	100
Ashley House	Forensic	95.94	100.37	103.58	94.07	13	93.1
Radford House	Forensic	90.60	142.95	154.88	90.95	16	97
Norton House	Forensic	81.28	92.00	133.26	66.21	12	91.7
Ellesmere House	Forensic	120.16	124.52	89.02	244.45	12	100
IFOR Willow Shrops	Forensic	75.65	100.15	105.10	106.83	20	96
IFOR Yew	Forensic	93.47	83.96	99.49	99.76	12	99
Oak House	LD	110.97	113.62	102.54	102.50	10	56.1
Brockington	M&B	106.97	150.61	157.49	113.71	8	60.9
Kinver (including HD)	ED	111.94	96.36	86.56	376.16	12	87.1
IDEM Holly Redwoods	AMH	103.99	85.73	100.73	135.04	16	99
IDEM Oak Redwoods	AMH	94.37	84.15	99.19	136.80	16	100
IFNCT Laurel Redwoods	AMH	86.61	101.79	100.92	305.71	16	98
IFNCT Pine Redwoods	AMH	97.70	112.58	106.41	192.38	16	95
IRER Birch Redwoods	AMH	125.68	119.02	138.05	105.06	14	*
Baswich	AMH	115.93	112.26	108.35	151.08	12	98
Brocton	AMH	89.46	123.68	84.91	206.60	21	93
Bromley	AMH	101.13	125.74	101.92	117.07	14	94
Chebsey House	AMH	122.13	74.13	98.52	106.33	20	94
Norbury	PICU	109.82	175.98	109.99	254.80	13	66
IAMH George Bryan Tamworth	AMH	97.95	99.17	99.06	221.95	20	96
ISFOP George Bryan Tamworth	AMH	114.45	127.36	99.72	109.15	12	98
ISS Inclusion Bham Tier 4	Sub M	119.35	72.47	100.48	100.37	18	**

Bed numbers and occupancy validated by Information Services

* Data not available due to service reconfiguration. **Data not available until w/c 26/01/15

Bed occupancy data has been added to the Nurse Staffing Fill Rate data table to give a more detailed picture of decisions around staffing levels and to determine any correlation between occupancy and staffing fill rates.

Table 2



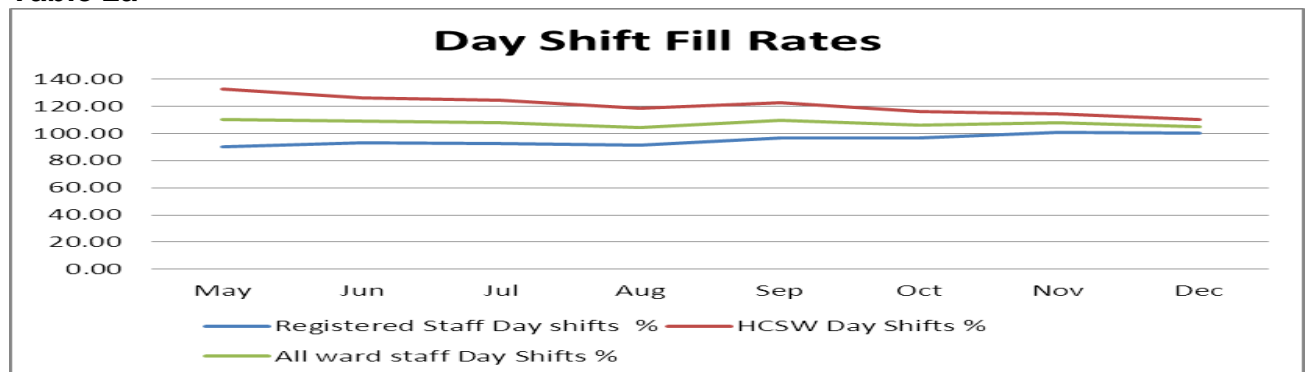
Overall fill rates for inpatient areas remains consistent at over 110%

Fill rates for registered nurses in the day have shown continuing improvement and now remain stable at around 100%

Fill rates for registered nurses at night reached the 100% target during October and remain stable

The gap between fill rates for HCSW's and RN's continues to reduce demonstrating harmonisation of fill rates for the two grades of staff with both groups moving towards the target (see below)

Table 2a



The Trust trend for overfill of Health Care Support Worker (HCSW) shifts particularly at night continues, due to additional staff being used to provide increased levels of observation when fewer staff from other disciplines are available and engagement of patients with high risk needs is required.

Forensic Directorate

Having consistently returned red ratings in multiple units since reporting began it is pleasing to report, for December data only two red rating in the Directorate.

Norton:

Cause and Effect

Rated red for HCSW fill at night; there is a direct correlation between under fill of HCSW at night and overfill of RN’s. Professional judgement has been employed and where there is a shortfall of HCSW’s due to vacancies and annual leave a decision has been taken to backfill with substantive RN’s, keeping the overall fill for night shifts at 100%

Planned Actions

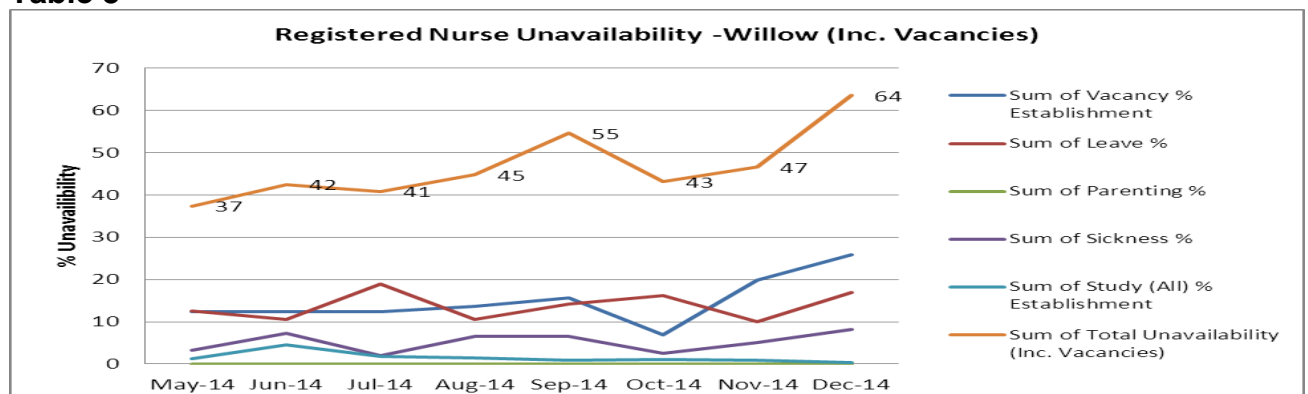
Harmonisation of skill mix will be addressed by the establishment review process and recruitment to budgeted establishment.

Willow: Otherwise consistent fill rates for HCSW’s and RN’s during the day and night; Willow have reduced fill for RN’s in the day.

Cause and Effect

Lower fill rates for RN’s during the day is attributed to higher than usual AL amongst RN’s, high sickness levels and 3 wte vacancies. A professional judgement decision has been made that backfill is not required as other professional disciplines have provided care during the day; e.g. the Ward Manager for this unit is an Occupational Therapist and whilst this staff group is not reported within the safe staffing figures she has been available on the unit during December.

Table 3



Planned Actions

1. Sickness is being managed within Trust policy
2. Recruitment continues to vacant posts
3. Professional judgement employed to assess and maintain quality and safety

Mental Health Staffordshire

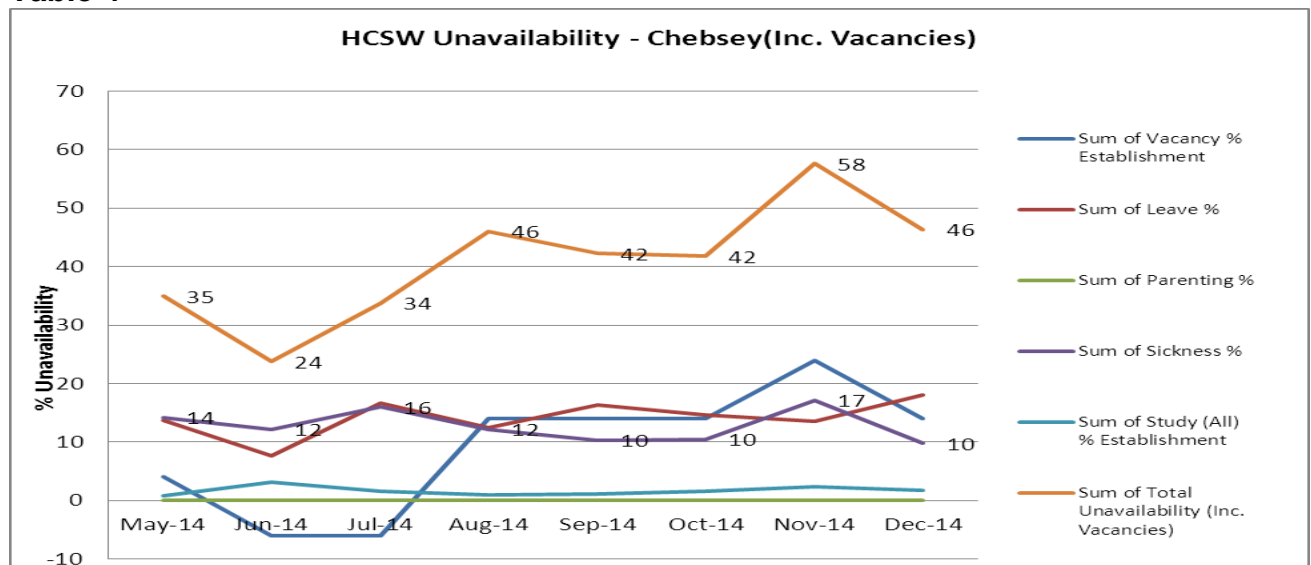
Only Chebsey ward remains red rated for fill rates for unregistered staff during the day

Chebsey:

Cause and Effect

Whilst overall unavailability has reduced for December the total unavailability remains above the Trust's budgeted headroom of 25%. High AL and sickness and 2.4 wte vacancies amongst HCSW's has contributed to the reduced fill rates. The unavailability of HCSW's has been directly backfilled by RN's to maintain overall staffing numbers, without impacting on night fill rates.

Table 4



Planned Actions

1. Sickness is being managed within Trust policy
2. Recruitment continues to vacant posts
3. Professional judgement employed to assess and maintain quality and safety

Specialist Services Directorate:

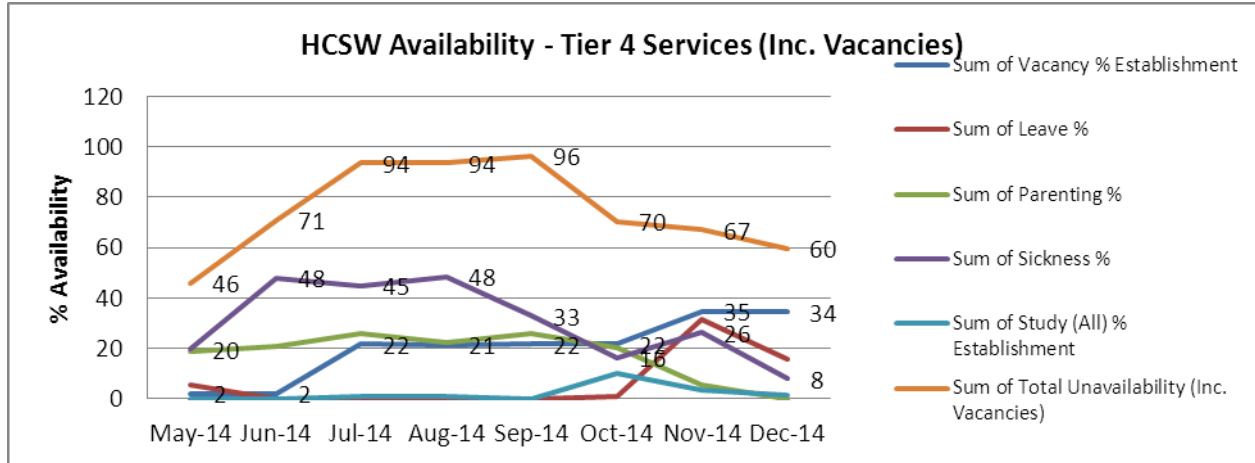
T4 Birmingham substance misuse inpatient service (Park House) continues to be rated red for day time HCSW staffing. Table 1

Cause and Effect

Total unavailability has decreased during December; a return from Maternity leave has contributed towards this however sickness, leave and vacancies remain high. Table 5

- High vacancy levels amongst HCSW's
- There are particular difficulties recruiting people with this skill set across the Birmingham area health economy

Table 5



Planned Actions

1. Sickness is being managed within Trust policy
2. A specific specialist agency is used to fulfil their flexible staffing requirements
3. Where demand for DSW's is not met the only safe measure is to backfill with registered staff. This is demonstrated in the overfill rates for registered staff
4. Recruitment to vacant posts continues

It should be noted that Park House is part of the Birmingham substance misuse service which was retendered for earlier this year. As a result of this, a new provider will be taking over the running of this service in March/April next year. The Trust is working closely with this new provider to ensure that staff are recruited to any vacancies that arise during this transitional period.