

TRUST BOARD MEETING

Report to:	Trust Board	Agenda item:	10b
Date of Meeting:	27 th November 2014		
Title of Report:	Exception Report for Expected and Actual Staffing for Nursing, Midwifery and Care Staffing (Ward Areas)		
Status of report: (decision and approval, position statement, information, confidential discussion)	Information		
Lead Executive Director:	Michelle Clarke, Director of Nursing & Quality		
Author:	Michelle Clarke, Director of Nursing & Quality		
Appendices:	Appendix 1 - Fill Rate Indicator Return Staffing: Nursing, midwifery and care staff – October 2014		
1. Purpose of the report			
To inform the Trust Board of the ward areas that didn't meet the expected staffing requirements in October 2014.			
2. Recommendations			
The Board are asked to note the content of the report.			
3. Summary of Key Issues for discussion			
<ul style="list-style-type: none"> • There are a number of shifts where there has been an overfill of additional staff. This is due to patients requiring high dependency (patients at risk of falls, dementia etc.) as well as patients requiring non-invasive ventilation care. • Fill rates have been low in some areas but not to the extent of previous months, but have been supported by additional Health Care Assistants. • Vacancies remain a challenge on medical wards at the County Hospital. 			
4. Reference to previous reports			
June/July/August/September/October 2014 Exception Report for Expected and Actual Staffing for Nursing, Midwifery and Care Staffing			
5. For further information or any enquires relating to this report please contact:			
Michelle Clarke, Director of Nursing & Quality, michelle.clarke@wvt.nhs.uk			

6. Please confirm, by ticking the box, that you have included or considered the following items in developing your report:

Background

Care Quality Commission Implications

Legal / NHS Constitution considerations

Analysis of Risk including link to the Board Assurance Framework and Risk Register

Resource Implications (staffing & financial)

Patient, Public and Stakeholder involvement

Exception Report for Expected and Actual Staffing for Nursing, Midwifery and Care Staffing (Ward Areas)

1.0 INTRODUCTION

1.1 As part of the National Quality Board guidance published in November 2013 there is a requirement to publish on a monthly basis nursing, midwifery and care staffing capacity and capability.

2.0 Main Body of Report

2.1 The attached appendix is published alongside every other Trust's data on the NHS Choices website on a monthly basis. This allows patients and the public to see how hospitals are performing on this indicator in an easy and accessible way. The data sits alongside a range of other safety indicators. These include CQC ratings, infection and cleanliness, open and honest reporting (patient safety incidents on NRLS), VTE risk assessment, response to patient safety alerts, NHS staff survey (staff recommendation) and the NHS Safety Thermometer.

2.2 There are a number of shifts where there has been an overfill of additional staff. This is due to patients requiring high dependency care (patients at risk of falls, dementia etc.) as well as patients requiring non-invasive ventilation care.

2.3 Fill rates of staff have been quite positive this month. The lowest fill rate was for Leominster Community Hospital of 75%, this was due to long term sickness and waiting for new starters to commence. This could be reflected by the number of slips, trips and falls, although none related to a serious injury and despite all assessments being completed there was a 'frequent faller', who had fallen five times, falls sensors were utilised, slipper socks utilised, but had severe cognitive impairment. Lugg Ward had the highest number of falls at the County Hospital, none resulting in a serious injury. A review of the patients who fell in October 2014 has been undertaken and all appropriate measures were taken including intentional rounding, risk assessments completed and where indicated additional staffing was put in place, no common themes were identified. The review has not identified any common themes however, Lugg Ward had had a high number of dependency patients (HDP) particularly with dementia.

The vacancy factor in Registered Nurses continues to be a challenge on that ward and whilst there has been an increased number of HCA's to support the HDP patient, this particular group of patients do have an increased risk of falls.

2.4 Where gaps have been identified, these are down to predominantly due to namely sickness or vacancy factor and maternity leave.

Appendix 1 – Fill Rate Indicator Return Staffing: Nursing, Midwifery and Care Staff – October 2014

Ward name	Day				Night				Day		Night		Comments
	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 (%)	
	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					
Womens Health	795	716.1	450	425.5	285	262	285	278.25	90.1%	94.6%	91.9%	97.6%	RN under due to vacancy
Maternity Ward	775	775	719	680.5	775	775	475	412.5	100.0%	94.6%	100.0%	86.8%	CS under due to vacancy
Childrens Ward	1912.5	1875	465	442.5	589	589	294.5	275.5	98.0%	95.2%	100.0%	93.5%	CS under due to vacancy and sickness
Lugg Ward	1860	1515.5	1395	1245.5	883.5	855	589	722	81.5%	89.3%	96.8%	122.6%	RN under due to vacancy CS over due to HDP at night
Arrow Ward	1627.5	1382	1162.5	1278.5	589	551	589	553.5	84.9%	110.0%	93.5%	94.0%	RN under due to vacancy CS over due to HDP
Wye Ward	2092.5	1819.5	1627.5	1620.5	883.5	902.5	883.5	1089	87.0%	99.6%	102.2%	123.3%	RN under due to vacancy
Acute Admissions Unit	3255	2992.25	1860	2281.25	2061.5	1972.5	883.5	1140	91.9%	122.6%	95.7%	129.0%	CS over due to HDP
Cardiac Care Unit	1162.5	960			589	589			82.6%		100.0%		
Hillside Intermediate Care	930	930	2092.5	2062.75	589	589	589	589	100.0%	98.6%	100.0%	100.0%	
Leominster Community Hospital	1395	1039.85	2325	2318.75	589	646.5	883.5	1041	74.5%	99.7%	109.8%	117.8%	RN under due to vacancy and sickness. CS over due to HDP
Bromyard Community Hospital	930	920	1395	1415.75	588	590.5	588	579.5	98.9%	101.5%	100.4%	98.6%	
Ross Community Hospital	1395	1441	2325	2536	589	580.5	1178	1335.5	103.3%	109.1%	98.6%	113.4%	CS over due to HDP
Leadon Ward	1395	1497.5	1162.5	1118	589	579.5	589	637.75	107.3%	96.2%	98.4%	108.3%	High dependency patient that had to be flexed for RN and CS
Teme Ward	1395	1287.25	1162.5	928	589	541.5	589	437	92.3%	79.8%	91.9%	74.2%	Under on RN and CS due to vacancy.
Monnow Ward	1395	1389	1162.5	1154.5	589	589	589	581.5	99.6%	99.3%	100.0%	98.7%	
Redbrook Ward	1627.5	1471.5	1395	1473	883.5	883.5	589	669.5	90.4%	105.6%	100.0%	113.7%	RN under due to vacancy. CS over due to HDP
Special Baby Care Unit	1162.5	1193			1162.5	1062.5			102.6%		91.4%		
Intensive Care Unit	1764	1716			2088	2028			97.3%		97.1%		