	Board nd 2015
Safe Nurse Staffing Report	Paper No
Submitted by: Juliette Greenwood Chief Nurse	
across all in- patient ward areas and appro demand for nursing staff. In order to provi	de greater transparency the report also es and details of ward safe staffing reports.
Action required from the meeting The Board is asked to note:	
 The content of the report and be as provided to meet the national and let 	sured that appropriate information is being ocal requirements.
The information on safe staffing an	d the impact on quality of care.
• To note the key challenges around	recruitment and the actions being taken.
Contribution to the delivery of NHS Fou Safe levels of nurse staffing are essential t perience.	
Compliance with <i>How to ensure the right p</i> place at the right time – A guide to nursing ity' (NHS England, Nov 2013) and the 'Har Publishing of Staffing Data' issued by the 0	, midwifery and care staffing and capabil- d Truths Commitments Regarding the
Financial implications	- deve to
Already incorporated into 15/16 Division bu	ldgets
Who needs to be told about any decision Divisional Management Teams Finance Department	n?
Who is responsible for implementing th	e proposals / project and anticipated
timescales? Chief Nurse; Assistant Chief Nurse, Heads	of Nursing
Who is accountable for the implementation Chief Nurse; Divisional Management Tean	

GOSH NURSE SAFE STAFFING REPORT

<u>April 2015</u>

1. Introduction

1.1 This report on GOSH Safe Nurse Staffing contains information from the month of April 2015. The report provides information on staff in post, safe staffing incidents, nurse vacancies and includes quality measures which are reported by exception.

2. Context and Background

- 2.1 The expectation is the Board 'take full responsibility for the care provided to patients and, as a key determinant of quality, take full and collective responsibility for nursing care capacity and capability'.
- 2.2 Monthly nurse staffing updates are submitted to NHS England and the Trust Board with the following information:
 - 1. The number of staff on duty the previous month compared to planned staffing levels.
 - 2. The reasons for any gaps, highlighting those wards where this is a consistent feature and impacts on the quality of care, to include actions being taken to address issues.
 - 3. The impact on key quality and safety measures.

3. GOSH Ward Nurse Staffing Information for Trust Board

3.1 Safe Staffing

- 3.1.1 The UNIFY Fill Rate Indicator for April is attached as Appendix 1. The spread sheet contains:
 - Total monthly planned staff hours; the Heads of Nursing provide this figure based on the agreed average safe staffing level for each of their wards. These figures are fixed i.e. do not alter month on month. Bed closure information is used to adjust the planned staffing levels.
 - Total monthly actual staff hours worked; this information is taken from RosterPro, and includes supervisory roles, staff working additional hours, CNS shifts, extra staff booked to cope with changes in patient dependency and acuity from the Nurse Bank. This may both exceed or be below 100% to meet the changing demands of patient activity, dependency and acuity.
 - Average fill rate of planned shifts. It must be noted that the presentation of data in this way is open to misinterpretation as the non-registered pool is small in comparison to the registered pool, therefore one HCA vacancy or extra shifts worked will have a disproportionate effect on the % level.
- 3.1.2 Commentary:
 - Heads of Nursing are asked to comment on percentage scores of less than 90% or greater than 110%, and declare any unsafe staffing situations that have occurred during the month in question including action taken to rectify and make the situation safe.

<u>ICI – No unsafe shifts reported in April</u>

Robin Ward and Fox Ward report high levels of sickness and several vacant posts. Several patients have been unable to commence treatment due to their clinical condition, this has resulted in some shifts with lower dependency and acuity, and reduced staffing. ICI staff are moved across wards to meet the needs of the patient population.

Penguin Ward, HCA requirement on night reduced due to patient numbers.

Surgery No unsafe shifts reported in April

Sky Ward – reduced night staff due to bed closures. Peter Pan higher acuity on day shifts requiring increase in Registered Nurses.

CCCR – No unsafe shifts reported in April

Badger report having increased numbers of Ward Intensive Care patients requiring 1:1 care. MIFFY have an extra nurse on days undergoing training. Two funded extra beds remain closed on Badger Ward. HCA numbers have increased and are being trained for their new posts hence the high numbers on days.

Flamingo planned staffing for 17 beds, up to 3 additional beds (total 20) are opened when staff available through the Nurse Bank.

NICU have increased sickness requiring extra staff on shifts and new staff on induction.

MDTS - No unsafe shifts reported in April

Variations in staffing on Rainforest Gastro Ward and Rainforest Endocrine/Metabolic Ward reflect changes in acuity and dependency.

Neurosciences - No unsafe shifts reported in April

Koala has reported high levels of acuity requiring extra staff.

A new HCA working supernumerary accounts for the increase in the day numbers from 1 to 2 HCAs (reported on UNIFY as 147%).

Mildred Creak Unit – Increased staffing to provide 1:1 care for several high risk patients.

IPP - No unsafe shifts reported in April

Bumblebee - increase in HCAs on days based on clinical need. Butterfly has seen an increase in day case activity resulting in fewer Registered staff on night shift. Staff worked flexibly across the wards as needed.

- 3.1.4 The Clinical Site Practitioners (CSPs) report that no wards were declared unsafe during April, however there were 6 occasions in April where staff were moved between wards for part or a whole shift to maintain safe care. A further 4 occasions are noted where wards reported shifts being short of staff despite this safety was not compromised.
- 3.1.5 As part of the required six monthly establishment review process the monthly planned staff hours are currently being validated.

3.2 General Staffing Information

- 3.2.1 Appendix 2 Ward Nurse Staffing overview for April. The table provides information on staff in post, vacancies and staff in the recruitment pipeline and includes bed closure information. 15 out of 23 inpatient wards closed beds at various points during April. An average of 17 beds were closed each day this has increased from 13.4 beds in March. The main reasons for this increase include maintenance and problems with the estate in Southwood Building. Peter Pan and Rainforest experienced severe disruption for several days following incidents with blocked drains. Badger Ward had 2 beds closed whilst staff were recruited and trained, Koala closed up to 4 beds due to increased patient acuity and dependency.
- 3.2.2 For the inpatient wards, registered and non-registered vacancies for April are 100 (10%) Whole Time Equivalents (WTE), this breaks down to 73 registered nurse (RN) vacancies (9% of RN total). HCA vacancies have increased slightly to 27 non registered vacancies (20% of HCA total). Temporary nurses, mainly from GOSH Nurse Bank, employed on wards totalled 89 WTE, the April position was therefore minus 11 WTE.

- 3.2.3 A total of 61 Band 3 6 new starters commenced in March and April. The majority will now be on supernumerary practice for a period of 1 3 months depending on their experience and the environment in which they work.
- 3.2.4 New starters progressing through pre-employment checks total 13 registered nurses and 2 HCAs.
- 3.2.5 A further 14 Health Care Assistants were successful at the April Assessment Centre and have been offered posts to commence in June, these candidates will become the second cohort to participate of the Care Certificate programme. HCA recruitment to the ICUs is on currently on hold pending further work on the education pathway.
- 3.2.6 GOSH staff attended a further 2 University Graduate job fairs and hosted a GOSH Recruitment Fair. Approximately 180 visitors attended the event, the majority were students from across the UK who qualify in September 2015, feedback from the event has been very positive. The subsequent advertisement has received 195 applications which are going through the shortlisting process. Five assessment Centres have been organised in June for students seeking employment at GOSH from September onwards.
- 3.2.7 As a Trust we continue to sustain recruitment against a backdrop of well publicised national nurse shortages.
- 3.2.8 The 6 monthly nurse establishment reviews will complete in May 2015, Trust Board will receive the report in July.

4 Key Challenges

- Recruitment of HCAs in the Critical Care areas.
- Recruitment of Band 6 Nurses.
- Retention of Band 5 and 6 Nurses.

5. Key Quality and Safety Measures and Information

- 5.1 Hard Truths Commitments Regarding the Publishing of Staffing Data (Care Quality Commission, March 2014) states 'data alone cannot assure anyone that safe care is being delivered. However research demonstrates that staffing levels are linked to the safety of care and that fewer staff increases the risks of patient safety incidents occurring.' In order to assure the Board of safe staffing on wards the following nursing quality and patient experience information has been collated to demonstrate that the wards were safe during April 2015.
- 5.2 The following quality measures provide a base line report for the Board. A number are Key Performance Indicators (KPIs) are regularly monitored, any poor results are challenged and investigated through the Nursing quarterly performance reviews led by the Chief Nurse with each Divisional Nursing team.

5.3 Infection control

C Difficile		
MRSA Bacteraemias	0	
MSSA Bacteraemias	1	
E Coli Bacteraemia	0	
D & V and other outbreaks	0	
Carbopenamase resistance	1	

5.3.1 All incidents are investigated via a root cause analysis and additional support put in place by the Infection Prevention and Control team. In addition, those areas that experienced small outbreaks of infection are subject to comprehensive chlorine clean.

5.4 **Pressure ulcers**

	Number	Ward
Grade 3	0	
Grade 2	3	Bear, Badger, Flamingo

5.5 **Deteriorating patient**

5.5.1 For the month of April, 8 patient related emergency calls were received of which 2 were cardiac arrests (Flamingo and Robin Wards) there was 1 respiratory arrest. In addition 13 patients had unplanned admissions to Intensive Care.

5.6 Numbers of safety incidents reported about inadequate nurse staffing levels

1 description of a busy shift on PICU; Bank nurses were cancelled which compromised the ability to admit new patients, it became apparent as the night progressed that these staff were indeed needed.

5.7 Pals concerns raised by families regarding nurse staffing - 0

5.8 **Complaints re nurse safe staffing - 0**

5.9 Friends and family test (FFT) data

- Response rate for February was 33% decreasing slightly to 32% in March, with a further reduction to 30% in April (Target 25%).
- The FFT score 80 increased from 80 in March to 82 in April.
- No wards scored below a "0" FFT score for April.
- Families that were extremely likely to recommend their friends and family was 82% (236) with 15% (44) likely to recommend.
- 2 Families (0.7%) were extremely unlikely to recommend. Reasons cited relate to the environment and attitude of staff on Penguin Ward, the second the attitude of hospital reception staff.

6. Conclusion

6.1 This paper has provided The Board with the required overview and assurance that all wards were safely staffed against agreed safe staffing levels during April, and appropriate actions were taken when concerns were raised. All Trusts are required to ensure the validity of data by triangulating information from different sources prior to providing assurance reports to their Board of Directors, this has been key to compiling the report.

7. **Recommendations -** The Board of Directors are asked to note:

- 7.1 The content of the report and be assured that appropriate information is being provided to meet the national and local requirements.
- 7.2 The information on safe staffing and the impact on quality of care.

7.3 The bi annual establishment review process will be complete in May 2015, the Board will receive the outcome report in July 2015.

Appendix 1: UNIFY Safe Staffing Submission – April 2015

Org: Period:		Great Ormond Stree 2015-16	t Hospital For Children NHS Foundation	Fill rate indicator return Trus Staffing: Nursing, midwifery and care staff														
				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)														
				Comments														
				Only complete sites your organisation is accountable for				D	ay		Night				Day		Night	
		1	Hospital Site Details		Main 2 Specialt	ies on each ward		istered es/nurses	Care	Staff	Regis midwive		Care Staff		Average fill		Average fill	
	alerts (see I panel)	Site code *The Site code is automatically populated when a Site name is selected	Hospital Site name	Ward name	Specialty 1	Specialty 2	Total monthly planned staff hours	Total monthly f 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	rate - registered nurses/midwiv es (%)	Average fill rate - care staff (%)	rate - registered nurses/midwiv es (%)	Average fill rate - care staff (%)
contro	n panel)	RP401	Great Ormond Street Hospital Central London Site	Badger Ward	340 - RESPIRATORY		2013	2605.9	299	425.5	1794	1980.1	299	152.6	129.5%	142.3%	110.4%	51.0%
		RP401		Bear Ward		321 - PAEDIATRIC	2709	3011.6	587	539.08	2709	2620	338	304.5	111.2%	91.8%	96.7%	90.1%
		RP401	Great Ormond Street Hospital Central London Site	Flamingo Ward	SURGERY 192 - CRITICAL CARE	CARDIOLOGY	5428	6669.5	345	333.5	5175	6235.65	207	162	122.9%	96.7%	120.5%	78.3%
		RP401	Great Ormond Street Hospital Central London Site	Miffy Ward (TCU)	MEDICINE 340 - RESPIRATORY		683	1007.2	1024	732.25	683	688.8	683	562.4	147.5%	71.5%	100.8%	82.3%
		RP401	Great Ormond Street Hospital Central London Site	Neonatal Intensive Care Unit	MEDICINE 192 - CRITICAL CARE		2639	3169.5		207	2309	2605.3		151.2	120.1%		112.8%	
			Great Ormond Street Hospital Central London Site	Paediatric Intensive Care	MEDICINE 192 - CRITICAL CARE		5865	6451.9	345	299	5865	5277.23	345	237.6	110.0%	86.7%	90.0%	68.9%
		RP401	Great Ormond Street Hospital Central London Site	Unit	MEDICINE 370 - MEDICAI													
		RP401	Great Ormond Street Hospital Central London Site	Elephant Ward	ONCOLOGY	823 - HAEMATOLOGY 313 - CLINICAL	1633	1829.9	345	338.2	1380	1395	345	335.5	112.1%	98.0%	101.1%	97.2%
		RP401	Great Ormond Street Hospital Central London Site	Fox Ward	303 - CLINICAL HAEMATOLOGY	IMMUNOLOGY and ALLERGY	2311	1629.5	343	325.85	1922	1293.3	343	328.9	70.5%	95.0%	67.3%	95.9%
		RP401	Great Ormond Street Hospital Central London Site	Giraffe Ward	313 - CLINICAL IMMUNOLOGY and ALLERGY	350 - INFECTIOUS DISEASES	1035	1069.5	345	195.5	1035	773.1	345	258.75	103.3%	56.7%	74.7%	75.0%
		RP401	Great Ormond Street Hospital Central London Site	Lion Ward	370 - MEDICAL ONCOLOGY	303 - CLINICAL HAEMATOLOGY	1633	1659.2	345	356.5	1380	1197.8	345	302.55	101.6%	103.3%	86.8%	87.7%
		RP401	Great Ormond Street Hospital Central London Site	Penguin Ward	330 - DERMATOLOGY	410 - RHEUMATOLOGY 313 - CLINICAL	943	943.5	345	619	690	655.1	345	112.2	100.1%	179.4%	94.9%	32.5%
	(RP401	Great Ormond Street Hospital Central London Site	Robin Ward	350 - INFECTIOUS DISEASES	IMMUNOLOGY and ALLERGY	1898	1678.39	331	294.55	1656	1253.6	331	318.8	88.4%	89.0%	75.7%	96.3%
		RP401	Great Ormond Street Hospital Central London Site	Bumblebee Ward	171 - PAEDIATRIC SURGERY	420 - PAEDIATRICS	2369	2556.65	338	529	2030	1947	676	348.4	107.9%	156.5%	95.9%	51.5%
		RP401	Great Ormond Street Hospital Central London Site	Butterfly Ward	370 - MEDICAL ONCOLOGY	420 - PAEDIATRICS	2468	2065.25	308	671	1851	1040.85	617	226.8	83.7%	217.9%	56.2%	36.8%
			Great Ormond Street Hospital Central London Site Great Ormond Street Hospital Central London Site	Eagle Ward Kingfisher Ward	361 - NEPHROLOGY 420 - PAEDIATRICS		2183 1748	2158.45 1685.6	675 897	443.7 609.5	1350 331	1386.85	337	271.65	98.9% 96.4%	65.7% 67.9%	102.7%	80.6%
		RP401	· ·	Rainforest Ward (Gastro)	301 - GASTROENTEROLOGY		730	829.28	534	402.18	534	611.92	534	239	113.6%	75.3%	114.6%	44.8%
		RP401	Great Ormond Street Hospital Central London Site	Rainforest Ward (Endo/Met)	GASTROENTEROLOGY 302 - ENDOCRINOLOGY		1035	1147.8	690	149.5	1035	683.9	345	228.2	110.9%	21.7%	66.1%	66.1%
		RP401	Great Ormond Street Hospital Central London Site Great Ormond Street Hospital Central London Site	Mildred Creak	711- CHILD and ADOLESCENT PSYCHIATRY		1022	1542.5	570	625	464	399.6	421	486	150.9%	109.6%	86.1%	115.4%
		RP401	Great Ormond Street Hospital Central London Site	Koala Ward	150 - NEUROSURGERY	421 - PAEDIATRIC	2458	2786.09	290	428.5	2787	2455.3		141.1	113.3%	147.8%	88.1%	
		RP401	Great Ormond Street Hospital Central London Site Great Ormond Street Hospital Central London Site	Peter Pan Ward	120 - ENT	160 - PLASTIC SURGERY	1189	1710	461	327.5	1118	1190.8			143.8%	71.0%	106.5%	
		RP401	Great Ormond Street Hospital Central London Site	Sky Ward	110 - TRAUMA & ORTHOPAEDICS	171 - PAEDIATRIC SURGERY	1868	2130.75	651	618.5	1824	1416.7			114.1%	95.0%	77.7%	
		RP401	Great Ormond Street Hospital Central London Site	Squirrel Ward	171 - PAEDIATRIC SURGERY	101 - UROLOGY	2828	3143.05	668	741	2538	2389.2		23	111.1%	110.9%	94.1%	

			Regist	tered Nursing	g staff	N	on Registere	d					Recruitme	nt Pipeline		
Division	Ward	Established Bed Numbers	Proposed Funded Establishment	Staff in Post	Vacancies	Proposed Funded establishment	Staff in Post	Vacancies	Total Estabslishment	Total Vacancies	Bank Used	Net Vacant	Registered Starters	Non- registered Starters	Number of unsafe shifts	Average Bed Closures
	Badger	15	39.5	34.0	5.5	7.5	5.0	2.5	47.0	8.0	4.0	4.0	1.0	0	0	2.0
cccR	Bear	22	47.8	42.0	5.8	9.0	6.0	3.0	56.8	8.8	4.7	4.1	1.0	0	0	0.4
	Flamingo	17	121.0	101.8	19.2	10.8	7.0	3.8	131.8	23.0	16.8	6.2	0.0	0	0	0.0
	Miffy (TCU)	5	14.0	12.5	1.5	7.8	6.0	1.8	21.8	3.3	4.5	-1.2	0.0	1	0	0.1
	NICU	8	51.5	41.8	9.7	5.2	1.0	4.2	56.7	13.9	7.8	6.1	2.0	0	0	0.4
	PICU	13	83.0	93.7	-10.7	8.9	5.0	3.9	91.9	-6.8	7.2	-14.0	2.0	0	0	0.0
	Elephant	13	25.7	23.0	2.7	4.9	5.1	-0.2	30.6	2.5	2.5	0.0	2.0	0	0	0.0
	Fox	10	31.0	23.0	8.0	5.2	5.0	0.2	36.2	8.2	4.1	4.1	2.0	0	0	0.1
ICI-LM	Giraffe	7	19.0	18.3	0.7	1.0	3.5	-2.5	20.0	-1.8	2.1	-3.9	0.0	0	0	0.0
CI	Lion	11	22.0	23.0	-1.0	5.2	4.0	1.2	27.2	0.2	2.8	-2.6	1.0	0	0	0.0
	Penguin	9	15.2	13.8	1.4	5.5	5.0	0.5	20.7	1.9	4.4	-2.5	0.0	0	0	0.0
	Robin	10	27.2	24.0	3.2	5.2	4.5	0.7	32.4	3.9	3.4	0.5	1.0	0	0	0.4
										I				1		
ЬР	Bumblebee	21	38.3	34.4	3.9	9.7	8.6	1.1	48.0	5.0	6.4	-1.4	0.0	1	0	0.4
_	Butterfly	18	37.2	29.4	7.8	10.5	10.0	0.5	47.7	8.3	1.2	7.1	1.0	0	0	2.1
	Co elo														-	
S	Eagle	21	39.5	34.5	5.0	10.5	10.0	0.5	50.0	5.5	1.3	4.2	0.0	0	0	0.2
MDTS	Kingfisher Rainforest Gastro	16	18.2	17.2	1.0	6.2	4.8	1.4	24.4	2.4	0.8	1.6	0.0	0	0	0.0
2	Rainforest Endo/Met	8	16.0	9.8	6.2	5.2	5.0	0.2	21.2	6.4	2.7	3.7	0.0	0	0	2.0
	Kaimorest Endo/ Wet	8	15.7	16.1	-0.4	5.2	4.0	1.2	20.9	0.8	0.8	0.0	0.0	0	0	0.0
4 0	Mildred Creak	10	11.8	15.2	-3.4	7.8	7.0	0.2	19.6	-3.2		-3.2	0.0	0	0	0.3
Neuro- scienc es	Koala	24	44.7	15.2 45.2	-3.4	7.8	7.6 5.5	1.6	51.8	-5.2	0.0	-3.2	0.0	0	0	3.8
~ ~ ~		24	44./	45.2	-0.5	/.1	5.5	1.0	51.0	1.1	4.1	-3.0	0.0		0	5.0
>	Peter Pan	16	24.5	23.0	1.5	5.0	4.0	1.0	29.5	2.5	0.4	2.1	0.0	0	0	4.1
Surgery	Sky	18	31.0	27.0	4.0	5.2	5.0	0.2	36.2	4.2	2.6	1.6	0.0	0	0	1.1
Sui	Squirrel	22	43.6	41.6	2.0	7.0	7.0	0.0	50.6	2.0	4.3	-2.3	0.0	0	0	0.3
				.1.0	۱ 			ı	I			۱				
	TRUST TOTAL:	322	817.4	744.3	73.1	155.6	128.6	27.0	973.0	100.1	88.9	11.2	13.0	2.0	0.0	17.7

Appendix 2: Overview of Ward Nurse Staffing – April 2015