Great Ormond Street Hospital for Children NHS Foundation Trust

Trust Board May 2016	
Safe Nurse Staffing Report for April 2016	**Paper No**
Submitted by: Juliette Greenwood Chief Nurse	

Aims / summary

This paper provides the required assurance that GOSH has safe nurse staffing levels across all in- patient ward areas and appropriate systems in place to manage the demand for nursing staff. In order to provide greater transparency the report also includes appropriate nurse quality measures and details of ward safe staffing reports. The paper includes a brief summary of nursing vacancies, nurse recruitment and this month contains specific information on nurse retention plans and initiatives.

Action required from the meeting

The Board is asked to note:

- The content of the report and be assured that appropriate information is being provided to meet the national and local requirements.

- The information on safe staffing and the impact on quality of care.

- To note the key challenges around recruitment and the actions being taken.

Contribution to the delivery of NHS Foundation Trust strategies and plans

Safe levels of nurse staffing are essential to the delivery of safe patient care and experience.

Compliance with *How to ensure the right people, with the right skills, are in the right place at the right time – A guide to nursing, midwifery and care staffing and capability'* (NHS England, Nov 2013) and the *'Hard Truths Commitments Regarding the Publishing of Staffing Data'* issued by the Care Quality Commission in March 2014.

Financial implications

Already incorporated into 15/16 Division budgets

Who needs to be told about any decision?

Divisional Management Teams
Finance Department

Who is responsible for implementing the proposals / project and anticipated timescales?

Chief Nurse; Assistant Chief Nurses, Head of Nursing

Who is accountable for the implementation of the proposal / project?

Chief Nurse; Divisional Management Teams

GOSH NURSE SAFE STAFFING REPORT

April 2016

1.   Introduction

1.1   This report on GOSH Safe Nurse Staffing contains information from the month of April 2016. The report provides information on staff in post, safe staffing incidents, nurse vacancies and includes quality measures which are reported by exception.

1.2   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'.

1.3   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.

2.   GOSH Ward Nurse Staffing Information for Trust Board

2.1   Safe Staffing

2.1.1   The UNIFY Fill Rate Indicator for April is attached as Appendix 1. The spreadsheet contains:

- Total monthly planned staff hours; the Divisional Assistant Chief Nurses and Head 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. A short term change in acuity and dependency requiring more or fewer staff is not reflected in planned hours but in the actual hours.

- Total monthly actual staff hours worked; this information is taken from the electronic rostering system (RosterPro), and includes supervisory roles, staff working additional hours, CNS shifts, and extra staff booked to cope with changes in patient dependency and acuity from the Nurse Bank. Supernumerary shifts are excluded. In order to meet the fluctuations in acuity and dependency the number may exceed or be below 100%.

- 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.

2.1.2   Commentary:

- Divisional Assistant Chief Nurses and IPP Head 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 actions taken at the time to rectify and make the situation safe.

- The overall Trust fill rate % for April (March) is:

RN Day	RN Night	HCA Day	HCA Night	Total Fill Rate
106% (96.7%)	99% (87.7%)	107% (94.5%)	74% (66.7%)	95% (86.4%)

Barrie – (MDTS/Neuro/Surgery) - No unsafe shifts reported in April

- 2 beds have been closed on Sky due to registered staff vacancies (see Appendix 2) and an increase in patient acuity. Beds were also temporarily closed on Squirrel due to an infection control outbreak and Peter Pan as a result of blocked drains.
- Staff were moved across the Division to maintain safe staffing levels and to maximise activity.

IPP – No unsafe shifts reported in April

- Bumblebee continues to utilise HCAs to care for infants without resident parents and trache-ostomy patients requiring 1:1 care and the variance with registered staff and bank staff is in a response to patient dependency.
- Beds on Bumblebee that were temporary closed were reopened in a staged process at the beginning of the month; the closure was due to patient dependency/complexity, short term sickness and skill mix.
- The variance in Butterfly Ward registered staff numbers on days and nights reflects the patient cohort which was predominately Day Case Surgery and ambulatory care Haematolo-gy/Oncology/BMT patients and the moving of nursing staff to support patient dependency on Bumblebee.
- The increase in HCA's number is due to the provision of additional support for long term pa-tients and recruitment of staff in preparation of the opening of the new ward – Hedgehog.
- Capacity planning is underway as it has been noted there is an increase in referrals of com-plex, highly dependent patients.

West – (CCCR/ICI) - No unsafe shifts reported in April

- Higher fill rates were due to an increase in dependency of patients and lower as a result of HCA vacancies, staff sickness and staff being across the division to support patient activity.
- Beds were temporarily closed on Badger due to an infection control issue and Bear due to ei-ther an increase in patient acuity and unfilled banks shifts.

2.1.3   The Clinical Site Practitioners (CSPs) report that no wards were declared unsafe during April; however 12 shifts are noted where wards reported being short of staff but safety was not compromised.

3.0   General Staffing Information

3.0.1   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.

3.0.2   9 (5 in March) out of 23 inpatient wards closed beds at various points during April. An average of 6.7 beds, were closed each day which is a decrease from March 2016 which had an average of 7.8 beds closed each day. The main reasons for this were problems with the estate in the Southwood Building; Peter Pan experienced severe disruption for several days following incidents with blocked drains. Infection control; Squirrel had bed closures due to a Diarrhoea & Vomiting outbreak and Badger due to an undiagnosed infectious patient being placed in the bay. Patient dependency and unfilled bank shifts on Bear, Koala and Bumblebee and registered staff vacancies on Sky.

3.0.3   For the inpatient wards at April 1st registered and non-registered vacancies total 96 Whole Time Equivalents (WTE) decrease from 108 in March. This breaks down to 72 (74 in March registered nurse (RN) vacancies (8.7% of RN total) and HCA vacancies number 23

(33 in March), (15% of HCA total). Temporary nurses, mainly from GOSH Nurse Bank, employed on wards totalled 99.5 WTE, the April position was therefore minus 3.1 net vacancy rate (-10 in March and 3 in February).

3.1 Vacancies and Recruitment

3.1.1 Staff attended both a University (Bournemouth) and a Health Expo (Dublin) Careers fair this month, both reviewed well by those attending. As with all the current and planned nurses' recruitment events, the candidate's expressions of interest will be followed up, tracked and analysed against job applications received and successful appointment.

3.1.2 GOSH hosted a Recruitment Fair and approximately 235 visitors attended the event which is over 50 more than last year, the majority were students from across the UK who qualify in September 2016, again the feedback from the event has been very positive. The subsequent advertisement has received 206 applications from both newly qualified and experienced nurses; these are currently in the shortlisting process. Assessment Centres have been organised in June and July for students seeking employment at GOSH from September onwards and experienced staff are being invited for interview over the coming month.

3.1.3 There has been a decrease this month in HCA vacancies to 23 wte, however there remains a significant number of unregistered (HCA) 14.9 wte vacancies in the ICU areas (64% of overall HCA vacancies), recruitment is still on hold pending local work on the education pathway and recruitment plans.

3.1.4 10 Band 3's, have been successfully recruited at April's Assessment centre and pending pre-employment checks are due to start in June 2016.

3.1.5 The Nursing Workforce Programme board have approved the Band 2 - 4 Clinical HealthCare Support Worker training and education pathway and the first cohort of these Paediatric Healthcare Support worker trainees is planned for September 2016.

3.1.6 18 either newly registered or experienced nurses are in the pipeline to start between May and July.

3.1.7 As a Trust we continue to sustain recruitment against a backdrop of well publicised national nurse shortages.

3.1.8 The 6 monthly nurse establishment reviews are planned to commence May/June 2016.

3.1.9 42% (41) of RN vacancies in April are at band 6.

4. Key Challenges

- Recruitment and retention of HCAs.
- Recruitment of Band 6 Nurses.
- Retention of Band 5 and 6 Nurses.
- Recruitment of staff to meet plans for growth.

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 2016.

5.2   The following quality measures provide a base line report for the Board. A number are Key Performance Indicators (KPIs) that are regularly monitored, any poor results are reviewed, challenged and investigated through the Divisional Chief Nurses and their review processes.

5.3   **Infection control**

Numbers of C diff's	?1 (to be reviewed by Dr Hartley)
Number of MRSA bacteraemias	0
Number of MSSA bacteraemias	4 (2 Healthcare Associated Infections, 2 Community Acquired Infections)
Number of E.coli bacteraemias	1
Number of outbreaks and whether any beds closed	2 outbreaks - Squirrel ward closed for 5 days
Carbapenemase-producing Entero-bacteriaceae	0
Hospital acquired enteric virus infections	29
Hospital acquired viral respiratory infections	6

5.4   **Pressure ulcers**

Grade 3	**0**	
Grade 2	**5**	CICU x 2 (2 x ETT- avoidable) PICU x 2 (1 x Ear - avoidable) Squirrel x 1 (Heel – unavoidable)

There is again a slight reduction in the number of ETT pressure ulcers 2 (3 in March). The new root cause analysis process is being used at present to investigate and implement action plans for all the above pressure ulcers.

5.5   **Deteriorating patient**

There were 6 2222 calls in April 2016, which is the same as March. There was 2 cardiac arrest (1 considered potentially preventable) on Flamingo and Bear ward. There were 4 respiratory arrests, 3 of which may have been preventable. In addition there were 9 unplanned admissions to the Intensive care units; 4 x Barrie Division (2 Squirrel, 1 Koala & 1 Rainforest Endo/Met); 4 x West Division (2 Badger, 1 Bear & 1 Lion); IPP (1 Bumblebee).

5.6   **Numbers of safety incidents reported about inadequate nurse staffing levels**

There was 1 incident reported by staff regarding shortages of nurses, this occurred on a night shift on Squirrel ward, ward staff were unable to collect a patient from theatre when requested which resulted in the theatre staff having to return the patient to the ward. The staffing was not felt to be unsafe and there was no adverse impact on patient care.

5.7   **Pals concerns raised by families regarding nurse staffing – 0**

There was 1 referral to Pals where an operation was delayed due to lack of PICU bed availability. The Trust continues operate at maximum capacity with increased pressures from RTT and it is unclear from these referrals whether nursing staff numbers contributed to the concerns reported

5.8   **Complaints received regarding nurse safe staffing – 0**

The Trust did not receive any complaints in regards to nurse safe staffing during April 2016.

5.9   All issues noted in 5.6 are under investigation by the respective Divisional Assistant Chief Nurse.

5.10   **Friends and family test (FFT) data**

Overall response rate for April 2016 has decreased to 23.58% (data extracted 10/05/2016) compared to 26.1% in March 2016. The target response rate has increased to 60%.

- The overall percentage to recommend score is 98.6% (data extracted 10/05/2016).
- 89% (628) families were extremely likely to recommend GOSH to their friends and family and 9.6% (68) responded as likely to recommend compared with 90% (708) and 9% (73) in March 2016.
- For information, the following negative comments or suggestions regarding staffing issues/staff behaviour have been received for the following wards.
  - 2 families were extremely unlikely to recommend GOSH due to prolonged waiting time for a bed and staff attitude (Kingfisher) and lack of communication from staff (Penguin)
- The following positive comments regarding outstanding performance regarding staff behaviour have been received for the following wards
  - Kingfisher, Puffin, Koala and Starfish received comments about amazing care and treatment, knowledgeable and kind nurses, confidence in care received, overall quality of care and patient experience.

6.0   Conclusion

6.1   This paper seeks to provide the Board of Directors with the required overview and assurance that all wards were safely staffed against the Trust's determined 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. Work is currently underway on a 5 year Recruitment and Retention strategy.

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.

7.4   The on-going challenges in retaining and recruiting nurses and HCA's.

7.5   The impact of the reform to student nurse funding on nurse recruitment.

Appendix 1: UNIFY Safe Staffing Submission – April 2016

Hospital Site Details			Main 2 Specialties on each ward		Day — Registered midwives/nurses		Day — Care Staff		Night — Registered midwives/nurses		Night — Care Staff		Day — Average fill rate - registered nurses/midwives (%)	Day — Average fill rate - care staff (%)	Night — Average fill rate - registered nurses/midwives (%)	Night — Average fill rate - care staff (%)
Site code	Hospital Site name	Ward 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				
RP401	GREAT ORMOND STREET HOSPITAL CEN	Badger Ward	340 - RESPIRATORY MEDICINE		2252	2424	336	358.5	2017	1911.3	336	228.2	107.6%	106.7%	94.8%	67.9%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Bear Ward	170 - CARDIOTHORACIC SURGERY	321 - PAEDIATRIC CARDIOLOGY	2679	3079.25	569	500	2679	2747.3	334	183.6	114.9%	87.9%	102.5%	55.0%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Flamingo Ward	192 - CRITICAL CARE MEDICINE		6796	7775.68	345	276	6394	6911.3	184	108	114.4%	80.0%	108.1%	58.7%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Miffy Ward (TCU)	340 - RESPIRATORY MEDICINE		690	932.75	1035	793	690	620.2	690	589.9	135.2%	76.6%	89.9%	85.5%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Neonatal Intensive Care Unit	192 - CRITICAL CARE MEDICINE		3105	3409.6	345	0	3105	3060.25	0	0	109.8%	0.0%	98.6%	-
RP401	GREAT ORMOND STREET HOSPITAL CEN	Paediatric Intensive Care Unit	192 - CRITICAL CARE MEDICINE		5865	6830.55	345	184	5865	5563.1	345	108	116.5%	53.3%	94.9%	31.3%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Elephant Ward	370 - MEDICAL ONCOLOGY	823 - HAEMATOLOGY	1621	1610.7	345	364	1380	1254.6	345	349.1	99.4%	105.5%	90.9%	101.2%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Fox Ward	303 - CLINICAL HAEMATOLOGY	313 - CLINICAL IMMUNOLOGY and ALLERGY	2055	1725	342	194.8	1895	1425.3	342	271.4	83.9%	57.0%	75.2%	79.4%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Giraffe Ward	313 - CLINICAL IMMUNOLOGY and ALLERGY	350 - INFECTIOUS DISEASES	1035	1169	345	264.5	1035	816.3	345	174.9	112.9%	76.7%	78.9%	50.7%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Lion Ward	370 - MEDICAL ONCOLOGY	303 - CLINICAL HAEMATOLOGY	1621	1551.1	345	379.5	1380	1165.6	345	278.85	95.7%	110.0%	84.5%	80.8%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Penguin Ward	330 - DERMATOLOGY	410 - RHEUMATOLOGY	931	1138.94	345	617.05	690	634.8	345	173.5	122.3%	178.9%	92.0%	50.3%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Robin Ward	350 - INFECTIOUS DISEASES	313 - CLINICAL IMMUNOLOGY and ALLERGY	1966	1473.9	345	426	1725	1274.8	345	470.4	75.0%	123.5%	73.9%	136.3%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Bumblebee Ward	171 - PAEDIATRIC SURGERY	420 - PAEDIATRICS	2349	2724.5	335	816.5	2013	2264.9	671	817.4	116.0%	243.7%	112.5%	121.8%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Butterfly Ward	370 - MEDICAL ONCOLOGY	420 - PAEDIATRICS	2756	2302.5	344	1001	2067	1366.5	344	297.9	83.5%	291.0%	66.1%	86.6%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Eagle Ward	361 - NEPHROLOGY		2208	2944.25	690	803.53	1380	1315.2	345	295.1	133.3%	116.5%	95.3%	85.5%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Kingfisher Ward	420 - PAEDIATRICS		1707	1684.02	879	528.35	294	379.4	0	43.9	98.7%	60.1%	129.0%	-
RP401	GREAT ORMOND STREET HOSPITAL CEN	Rainforest Ward (Gastro)	301 - GASTROENTEROLOGY		909	1266.65	673	239.5	673	694	673	206.95	139.3%	35.6%	103.1%	30.8%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Rainforest Ward (Endo/Met)	302 - ENDOCRINOLOGY		1035	1067.28	690	287.5	1035	720.75	345	266.9	103.1%	41.7%	69.6%	77.4%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Mildred Creak	711- CHILD and ADOLESCENT PSYCHIATRY		1077	1044.8	587	675	490	378.7	437	315.3	97.0%	115.0%	77.3%	72.2%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Koala Ward	150 - NEUROSURGERY	421 - PAEDIATRIC NEUROLOGY	3204	3169.47	340	568.5	3090	2649.6	340	205.9	98.9%	167.2%	85.7%	60.6%
RP401	GREAT ORMOND STREET HOSPITAL CEN	Peter Pan Ward	120 - ENT	160 - PLASTIC SURGERY	1386	1066.75	535	391	1281	955.3	0	43.2	77.0%	73.1%	74.6%	-
RP401	GREAT ORMOND STREET HOSPITAL CEN	Sky Ward	110 - TRAUMA & ORTHOPAEDICS	171 - PAEDIATRIC SURGERY	1789	1780.5	627	946	1737	1418.7	0	11.5	99.5%	150.9%	81.7%	-
RP401	GREAT ORMOND STREET HOSPITAL CEN	Squirrel Ward	171 - PAEDIATRIC SURGERY	101 - UROLOGY	2700	3029.3	642	748	2421	2461.4	0	141.8	112.2%	116.5%	101.7%	-

Appendix 2: Overview of Ward Nurse Staffing – April 2016

Speciality	Ward	Established Bed Numbers	Registered Nursing staff			Non Registered			Total Establishment	Total Vacancies	Bank Used	Net Vacant	Recruitment Pipeline		Number of unsafe shifts	Average Bed Closures
			Proposed Funded Establishment	Staff in Post	Vacancies	Proposed Funded establishment	Staff in Post	Vacancies					Registered Starters	Non-registered Starters		
CardioRespiratory	Badger	15	39.5	37.0	2.5	7.5	7.0	0.5	47.0	3.0	2.2	0.8	0.0	1	0	0.4
	Bear	24	53.5	50.4	3.1	9.0	8.4	0.6	62.5	3.7	4.4	-0.7	0.0	0	0	0.6
	Miffy (TCU)	5	14.1	11.4	2.7	10.4	7.5	2.9	24.5	5.6	5.5	0.1	0.0	3	0	0.0
Critical Care	Flamingo	17	121.0	107.0	14.0	10.8	5.0	5.8	131.8	19.8	19.0	0.8	6.0	0	0	0.0
	NICU	8	51.5	45.0	6.5	5.2	2.0	3.2	56.7	9.7	9.1	0.6	0.0	0	0	0.0
	PICU	13	83.1	85.8	-2.7	8.9	3.0	5.9	92.0	3.2	7.5	-4.3	4.0	0	0	0.0
Haematology/Oncology/Dermatology/Rheumatology	Elephant	13	25.0	20.9	4.1	5.0	5.1	-0.1	30.0	4.0	2.4	1.6	1.0		0	0.0
	Fox	10	31.0	25.2	5.8	5.0	5.0	0.0	36.0	5.8	2.1	3.7	1.0	2	0	0.1
	Giraffe	7	19.0	19.7	-0.7	3.1	3.0	0.1	22.1	-0.6	1.0	-1.6			0	0.0
	Lion	11	22.0	22.8	-0.8	4.0	4.0	0.0	26.0	-0.8	4.3	-5.1			0	0.0
	Penguin	9	15.5	17.8	-2.3	5.8	5.8	0.0	21.3	-2.3	1.3	-3.6			0	0.0
	Robin	10	27.2	23.7	3.5	4.5	4.4	0.1	31.7	3.6	4.9	-1.3			0	0.0
IPP	Bumblebee	21	38.3	34.3	4.0	9.7	12.0	-2.3	48.0	1.7	11.8	-10.1		2	0	0.6
	Butterfly	18	37.2	25.4	11.8	10.5	9.9	0.6	47.7	12.4	4.5	7.9			0	0.0
MDTS	Eagle	21	39.5	35.6	3.9	10.5	8.0	2.5	50.0	6.4	2.8	3.6	1.0		0	0.0
	Kingfisher	16	17.1	14.2	2.9	6.2	4.9	1.3	23.3	4.2	1.7	2.5		1	0	0.0
	Rainforest Gastro	8	17.0	15.9	1.1	4.0	3.5	0.5	21.0	1.6	0.3	1.3			0	0.2
	Rainforest Endo/Met	8	15.6	14.6	1.0	5.2	5.5	-0.3	20.8	0.7	1.8	-1.1			0	0.0
Neurosciences	Mildred Creak	10	11.8	14.2	-2.4	7.8	7.3	0.5	19.6	-1.9	0.3	-2.2			0	0.0
	Koala	24	48.2	44.0	4.2	7.8	6.0	1.8	56.0	6.0	7.0	-1.0			0	0.3
Surgery	Peter Pan	16	24.5	23.1	1.4	5.0	5.0	0.0	29.5	1.4	0.8	0.6	1.0		0	1.4
	Sky	18	31.0	24.8	6.2	5.2	5.0	0.2	36.2	6.4	2.7	3.7	4.0		0	1.6
	Squirrel	22	43.6	40.8	2.8	7.0	7.0	0.0	50.6	2.8	2.0	0.8			0	1.5
	TRUST TOTAL:	324	826.2	753.6	72.6	158.1	134.3	23.8	984.3	96.4	99.5	-3.1	18.0	9.0	0.0	6.7