Trust Board
27th January 2016

Safe Nurse Staffing Report for December 2015	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 Nurse, Heads of Nursing

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

Chief Nurse; Divisional Management Teams

GOSH NURSE SAFE STAFFING REPORT

December 2015

1.   Introduction

1.1   This report on GOSH Safe Nurse Staffing contains information from the month of December 2015. 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 December is attached as Appendix 1. The spreadsheet 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. 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:

- 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 actions taken at the time to rectify and make the situation safe.

- The overall Trust fill rate % for December is:

RN Day	RN Night	HCA Day	HCA Night	Total Fill Rate
102%	91%	90%	70%	95%

ICI – No unsafe shifts reported in December
Fox and Robin Ward had one bed closed on each ward for December.
To meet patient/staffing requirements HCAs shifts were changed from the plan hence the variable fill rates across the division. Staffing was reduced depending on the divisional requirements over the Christmas break, several patients were on home leave. Penguin had an increase in day activity due to RTT work hence the increase in HCAs. There were a number of short notice sickness episodes on Robin affecting actual staffing numbers.
Surgery No unsafe shifts reported in December
Beds and staffing were adjusted from plan hence the lower fill rates. Several HCAs were moved from days to nights which this template does not recognise, however these hours are included in the overall Trust fill rate.
CCCR – No unsafe shifts reported in December
Bear has been open to 24 beds 2 above plan hence extra staff required.
Miffy ward - some HCA shifts filled with registered staff.
Flamingo has recruited HCAs who are not yet rostered, NICU and PICU have HCA vacancies.
MDTS - No unsafe shifts reported in December
Eagle Ward report increased levels of Haemodialysis treatments requiring increased registered nurses on day shifts. Kingfisher Ward, Rainforest Gastro and Endo/Met had planned seasonal closures. 4 HCA vacancies have now been filled, therefore the fill rate is expected to improve. Extra Registered Nurse hours were employed to compensate for deficit in HCA hours.
Neurosciences - No unsafe shifts reported in December
Koala Ward - more HCA hours during day shifts due staff working as Patient Pathway Coordinators. MCU had a particularly demanding time,
IPP - No unsafe shifts reported in December
Bumblebee utilising HCAs to care for infants with absent parents during day shifts and moving staff across shifts to facilitate this. Butterfly Ward had a number of beds blocked for ICU repatriation and throughout December times of reduced activity. Night registered nurse numbers were deliberately lowered on Butterfly ward due to changes in activity and acuity of patients. Staff were flexed across the division to ensure patient safety.

2.1.3 The Clinical Site Practitioners (CSPs) report that no wards were declared unsafe during December, however there were 4 shifts in total where CSPs moved staff between wards for part or a whole shift to maintain safe care.

3.0 General Staffing Information

3.0.1 Appendix 2 – Ward Nurse Staffing overview for December. The table provides information on staff in post, vacancies and staff in the recruitment pipeline and includes bed closure information.

3.0.2 There has been sustained effort over recent months to reduce the number of beds closed due to nurse staffing issues. 10 out of 23 inpatient wards closed beds at various points during December. An average of 8.6 beds were closed each day. This includes seasonal closures of some wards/beds for Christmas and New Year. Eagle continued to close 2 ward beds on a number of occasions to staff the dialysis service. For most of December Robin and Fox wards also closed a bed each due to short term vacancies and skill mix.

3.0.3 For the inpatient wards at January 1st registered and non-registered vacancies total 90 Whole Time Equivalents (WTE) an increase from 79 in November. This breaks down to 61

(45 in November) registered nurse (RN) vacancies (7% of RN total). HCA vacancies number 29 (18% of HCA total) 5 less than reported in November. Temporary nurses, mainly from GOSH Nurse Bank, employed on wards totalled 81 WTE, the December position was therefore 10 WTE posts above establishment (38 in October and 19 in November). This is due to staff coming out of supernumerary status. There are 47 RNs and 11 HCAs in the recruitment pipeline undergoing pre-employment checks.

3.1 Vacancies and Recruitment

3.1.1 There remains 29 HCA vacancies, an extra round of recruitment commenced in December, the Trust is finding it difficult to recruit and train HCAs in sufficient numbers to keep pace with turnover. In addition IPP have recruited 5 HCAs for their new ward opening later in 2016.

3.1.2 In total 26 Newly Registered Nurses were recruited from the December Assessment Centre, this is in addition to the 18 recruited from the Republic of Ireland. An additional advert was placed in late December for Newly Registered Nurses with 13 applicants shortlisted, these candidates will go through an assessment centre on January 25th.

3.1.3 An additional Newly Registered Rotation Programme is planned for March 2016, 12 posts have been ring fenced for this programme.

3.1.4 Three agencies are working on our behalf to source overseas nurses. The process of registration with the NMC is costly for applicants and the level of assessment for language skills will change in January 2016 making the appointment of overseas staff more difficult. Agencies advise the use of 'benefits packages' to encourage nurses to relocate. This will be further discussed in line with the 2016 recruitment plan.

3.1.5 57% (35) of RN vacancies in December are at band 6.

4. Key Challenges

- Recruitment and retention of HCAs.

- Recruitment of Band 6 Nurses.

- Retention of Band 5 and 6 Nurses.

- Recruit 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 December 2015.

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 Nursing quarterly performance reviews led by the Chief Nurse with each Divisional Nursing team.

5.3 Infection control

C Difficile	0	

MRSA Bacteraemias	0	
MSSA Bacteraemias	2	
E Coli Bacteraemia	3	
D & V and other outbreaks	1	Norovirus on 1 ward - beds not closed.
Carbopenamase resistance	1	Awaiting Confirmation

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 a comprehensive chlorine clean.

5.4   Pressure ulcers

	Number	Ward
Grade 3	0	
Grade 2	7	2 on Squirrel Ward,3 PICU, 1 Koala Ward and 1 Flamingo Ward

5.4.1   We treat all pressure ulcers as avoidable at present. The 3 Pressure ulcers noted on Squirrel and Koala related to the use of anti-embolism stockings. An awareness campaign has reminded staff of the correct measuring and fitting of the stockings and the importance of good skin care.

5.4.2   3 of the remaining reports relate to the use of Non Invasive ventilation equipment. The Tissue Viability Nurse and Practice Educator are developing guidance for staff on prevention e.g. for patients with tracheostomies or on non-invasive ventilation. Further work will commence in January with anaesthetists and nursing staff.

5.5   Deteriorating patient

5.5.1   For the month of December, 7 emergency calls were received, there were no cardiac or respiratory arrests. Good practice in early recognition and detection of deteriorating patients has been noted. There were 12 unplanned admissions to PICU, these are patients whose condition was showing signs of deterioration and therefore were admitted semi electively to ICU for ongoing assessment and management.

5.6   Numbers of safety incidents reported about inadequate nurse staffing levels

There were 2 incidents in total reported by staff through Datix regarding staffing levels, both on Penguin Ward. On each occasion the nurses noted insufficient staff to manage the patient cohort. On investigation a gap in the knowledge of staff was apparent, this has now been rectified and staff are aware of the correct escalation procedure.

5.7   Pals concerns raised by families regarding nurse staffing - 2

Badger Ward – admission cancelled twice due to lack of beds, admission date agreed and patient admitted on the 23rd December. The second incident related to Walrus where a patient was cancelled due to lack of beds and staff.

5.8   Complaints received regarding nurse safe staffing - 0

5.9   All issues noted in 5.6 and 5.7 are under investigation by the respective Head of Nursing.

5.10   Friends and family test (FFT) data

- Overall response rate for December reduced to 18.5% (November 21%). The overall target is 40% response rate increasing to 60% at the end of Quarter 4 2015/16.
- The overall percentage to recommend remains at 98%.
- Families that were extremely likely to recommend GOSH to their friends and family totalled 90% (475) and 8% (45) responded as likely to recommend compared with 87.5% (573) and 10.4% (68) in November 2015.
- Many comments were received regarding the friendliness of staff, confidence in care received, overall quality of care and cleanliness.
- One family were unhappy with the level of care their child received when a blocked catheter required urgent attention.

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 December, 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. Whilst recruitment of staff is a high priority there will be a shift in focus on improving retention rates of nurses, work is underway to plan our 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.

Fill rate indicator return
Staffing: Nursing, midwifery and care staff

Org: RP4 Great Ormond Street Hospital For Children NHS Foundation Trust

Period: December_2015-16

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

	Hospital Site Details		Ward name	Main 2 Specialties on each ward		Day				Night				Day		Night	
Validation alerts (see control panel)	Site code *The Site code is automatically populated when a Site name is selected	Hospital Site name		Specialty 1	Specialty 2	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				
	RP401	Great Ormond Street Hospital Central London Site	Badger Ward	340 - RESPIRATORY MEDICINE		2403	2288.5	356	344	2139	2138.1	356	274.2	95.2%	96.6%	100.0%	77.0%
	RP401	Great Ormond Street Hospital Central London Site	Bear Ward	170 - CARDIOTHORACIC SURGERY	321 - PAEDIATRIC CARDIOLOGY	2852	3349.5	621	768	2852	3006.3	356	486	117.4%	123.7%	105.4%	136.5%
	RP401	Great Ormond Street Hospital Central London Site	Flamingo Ward	192 - CRITICAL CARE MEDICINE		7038	6618.97	356	310.5	6635	5990.45	218	109.85	94.0%	87.2%	90.3%	50.4%
	RP401	Great Ormond Street Hospital Central London Site	Miffy Ward (TCU)	340 - RESPIRATORY MEDICINE		713	827.4	1069	756	713	698.2	713	447.35	116.0%	70.7%	97.9%	62.7%
	RP401	Great Ormond Street Hospital Central London Site	Neonatal Intensive Care Unit	192 - CRITICAL CARE MEDICINE		3122	3329.8	346	138	3122	2865.5	0	32.4	106.7%	39.9%	91.8%	-
	RP401	Great Ormond Street Hospital Central London Site	Paediatric Intensive Care Unit	192 - CRITICAL CARE MEDICINE		6060	6806.6	356	276	6060	5827.9	356	129.6	112.3%	77.5%	96.2%	36.4%
	RP401	Great Ormond Street Hospital Central London Site	Elephant Ward	370 - MEDICAL ONCOLOGY	823 - HAEMATOLOGY	1690	1659.66	356	385.2	1426	1287	356	305.2	98.2%	108.2%	90.3%	85.7%
	RP401	Great Ormond Street Hospital Central London Site	Fox Ward	303 - CLINICAL HAEMATOLOGY	313 - CLINICAL IMMUNOLOGY and ALLERGY	1930	2042.05	321	171.1	1805	1604.7	321	239	105.8%	53.3%	88.9%	74.5%
	RP401	Great Ormond Street Hospital Central London Site	Giraffe Ward	313 - CLINICAL IMMUNOLOGY and ALLERGY	350 - INFECTIOUS DISEASES	1069	1387.3	356	218.5	1069	977.6	356	185.7	129.8%	61.4%	91.4%	52.2%
	RP401	Great Ormond Street Hospital Central London Site	Lion Ward	370 - MEDICAL ONCOLOGY	303 - CLINICAL HAEMATOLOGY	1690	1683.75	356	345	1426	1184.9	356	231.7	99.6%	96.9%	83.1%	65.1%
	RP401	Great Ormond Street Hospital Central London Site	Penguin Ward	330 - DERMATOLOGY	410 - RHEUMATOLOGY	959	1090.35	349	634.64	699	671.65	349	56.1	113.7%	181.8%	96.1%	16.1%
	RP401	Great Ormond Street Hospital Central London Site	Robin Ward	350 - INFECTIOUS DISEASES	313 - CLINICAL IMMUNOLOGY and ALLERGY	1871	1834.8	325	276	1629	1296.4	325	373.5	98.1%	84.9%	79.6%	114.9%
	RP401	Great Ormond Street Hospital Central London Site	Bumblebee Ward	171 - PAEDIATRIC SURGERY	420 - PAEDIATRICS	2495	2410.75	356	552	2139	2123.35	713	600.35	96.6%	155.1%	99.3%	84.2%
	RP401	Great Ormond Street Hospital Central London Site	Butterfly Ward	370 - MEDICAL ONCOLOGY	420 - PAEDIATRICS	2848	2231.5	356	854.5	2136	1236.5	356	326.8	78.4%	240.0%	57.9%	91.8%
	RP401	Great Ormond Street Hospital Central London Site	Eagle Ward	361 - NEPHROLOGY		2134	3404	658	981	1316	1468.85	329	220.2	159.5%	149.1%	111.6%	66.9%
	RP401	Great Ormond Street Hospital Central London Site	Kingfisher Ward	420 - PAEDIATRICS		1817	1442	931	484	349	485.17	0	0	79.4%	52.0%	139.0%	-
	RP401	Great Ormond Street Hospital Central London Site	Rainforest Ward (Gastro)	301 - GASTROENTEROLOGY		954	1110.7	696	218.5	696	793.3	696	174.9	116.4%	31.4%	114.0%	25.1%
	RP401	Great Ormond Street Hospital Central London Site	Rainforest Ward (Endo/Met)	302 - ENDOCRINOLOGY		1069	1153.35	713	287.5	1069	812.1	356	262.7	107.9%	40.3%	76.0%	73.8%
	RP401	Great Ormond Street Hospital Central London Site	Mildred Creak	711- CHILD and ADOLESCENT PSYCHIATRY		1126	1137.7	632	597.7	511	618.1	465	425.7	101.0%	94.6%	121.0%	91.5%
	RP401	Great Ormond Street Hospital Central London Site	Koala Ward	150 - NEUROSURGERY	421 - PAEDIATRIC NEUROLOGY	3246	3095.15	342	452.5	3158	2710.5	342	87.1	95.4%	132.3%	85.8%	25.5%
	RP401	Great Ormond Street Hospital Central London Site	Peter Pan Ward	120 - ENT	160 - PLASTIC SURGERY	1255	1012	487	230	1183	821.6	0	66.9	80.6%	47.2%	69.5%	-
	RP401	Great Ormond Street Hospital Central London Site	Sky Ward	110 - TRAUMA & ORTHOPAEDICS	171 - PAEDIATRIC SURGERY	2036	1725.75	709	751.17	1990	1520.1	0	11.5	84.8%	105.9%	76.4%	-
	RP401	Great Ormond Street Hospital Central London Site	Squirrel Ward	171 - PAEDIATRIC SURGERY	101 - UROLOGY	2952	2843.13	696	540.75	2649	2318.2	0	64.8	96.3%	77.7%	87.5%	-

Appendix 2: Overview of Ward Nurse Staffing – December 2015

Division	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		
CCCR	Badger	15	39.5	39.7	-0.2	7.5	5.0	2.5	47.0	2.3	3.9	-1.6	1.0	0	0	0.0
	Bear	22	47.7	49.8	-2.1	9.0	9.4	-0.4	56.7	-2.5	2.8	-5.3	7.0	0	0	0.0
	Flamingo	17	121.0	100.0	21.0	10.8	5.0	5.8	131.8	26.8	15.1	11.7	5.0	1	0	0.0
	Miffy (TCU)	5	14.1	12.7	1.4	7.8	5.5	2.3	21.9	3.7	3.3	0.4	0.0	2	0	0.0
	NICU	8	51.5	44.1	7.4	5.2	2.0	3.2	56.7	10.6	8.5	2.1	4.0	0	0	0.2
	PICU	13	83.1	89.0	-5.9	8.9	3.0	5.9	92.0	0.0	8.5	-8.5	7.0	0	0	0.0
ICI-LM	Elephant	13	25.0	24.6	0.4	5.0	4.1	0.9	30.0	1.3	2.3	-1.0	3.0		0	0.0
	Fox	10	31.0	28.2	2.8	5.0	4.0	1.0	36.0	3.8	1.3	2.5	0.0	0	0	1.0
	Giraffe	7	19.0	18.8	0.2	3.1	3.0	0.1	22.1	0.3	1.1	-0.8	1.0	0	0	0.0
	Lion	11	22.0	23.8	-1.8	4.0	3.0	1.0	26.0	-0.8	2.2	-3.0	0.0	0	0	0.0
	Penguin	9	15.5	15.8	-0.3	5.8	5.8	0.0	21.3	-0.3	1.7	-2.0	1.0	0	0	0.2
	Robin	10	27.2	23.7	3.5	4.5	5.1	-0.6	31.7	2.9	2.6	0.3	0.0	0	0	0.9
IPP	Bumblebee	21	38.3	33.8	4.5	9.7	9.0	0.7	48.0	5.2	7.5	-2.3	2.0	1	0	0.0
	Butterfly	18	37.2	31.4	5.8	10.5	8.9	1.6	47.7	7.4	2.8	4.7	1.0	2	0	0.0
MDTS	Eagle	21	39.5	33.6	5.9	10.5	11.0	-0.5	50.0	5.4	1.9	3.5	1.0	3	0	1.1
	Kingfisher	16	17.1	14.2	2.9	6.2	5.8	0.4	23.3	3.3	1.4	1.9	0.0	0	0	0.0
	Rainforest Gastro	8	17.0	16.9	0.1	4.0	3.5	0.5	21.0	0.6	0.9	-0.3	0.0	1	0	0.2
	Rainforest Endo/Met	8	15.6	14.6	1.0	5.2	3.5	1.7	20.8	2.7	1.4	1.3	2.0	1	0	0.0
Neurosciences	Mildred Creak	10	11.8	9.5	2.3	7.8	7.3	0.5	19.6	2.8	3.0	-0.2	0.0	0	0	0.0
	Koala	24	48.2	43.4	4.8	7.8	5.0	2.8	56.0	7.6	1.9	5.7	3.0		0	1.0
Surgery	Peter Pan	16	24.5	21.9	2.6	5.0	6.0	-1.0	29.5	1.6	1.0	0.7	3.0	0	0	3.4
	Sky	18	31.0	25.2	5.8	5.2	5.0	0.2	36.2	6.0	2.6	3.4	3.0	0	0	0.1
	Squirrel	22	43.6	44.7	-1.1	7.0	6.0	1.0	50.6	-0.1	2.9	-3.0	3.0	0	0	0.5
	TRUST TOTAL:	**322**	**820.4**	**759.4**	**61.0**	**155.5**	**125.9**	**29.6**	**975.9**	**90.6**	**80.6**	**10.1**	**47.0**	**11.0**	**0.0**	**8.6**