

Safer Staffing Report May/June 2018

Always

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Nursing & HCA Safe Staffing- May 2018

Definition

Trend

Comments

Actual vs Planned Hours shows the percentage of Nursing & Care staff who worked (including Bank) as a percentage of planned care hours in month. The National Quality Board recommendations are the parameters should be between 90-110%.

Unify Actual vs Planned Hours

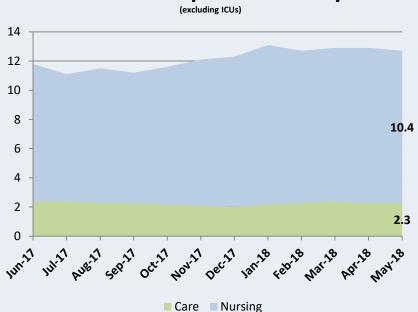
120%
110%
100%
90%
80%
70%
60%

Actual vs Planned has increased from 99.5% in April to 103% in May. Nursing hours during the day were 116.2% against plan and 99.4% at Night.

The trend for May was 103.5% therefore within safe staffing parameters.

Care Hours Per Patient Day (CHPPD) - CHPPD is calculated by adding the hours of registered nurses and healthcare support workers available in a 24 hour period and dividing the total by the number of patients at midnight. CHPPD is reported as a total and split by registered nurses and HCAs to provide a complete picture of care and skill mix. CHPPD data is uploaded onto the national Unify system and published on NHS Choices on a monthly basis.

Care Hours per Patient Day



CHPPD for May was 12.7. This is slightly lower than in April but compares favourably to the same month last year (11.5). This figure is an indication of "care" hours given to patients, so if the total was 24, that indicates every patient received 1:1 nursing, Mays' figures indicates that patients received, on average 1:2 nursing. This is used to reflect the activity on each ward and the staffing levels required. These results cannot be taken in isolation but is compared to the Unify results to ensure that safe staffing was achieved. Recorded patient numbers increased last month from 7,731 to 8,042, this is a positive trend, showing an increase in patient numbers but still having 1:2 nursing.

Nursing & HCA Safe Staffing- June 2018

Definition

Trend

60%

Comments

Actual vs Planned Hours shows the percentage of Nursing & Care staff who worked (including Bank) as a percentage of planned care hours in month. The National Quality Board recommendations are the parameters should be between 90-110%.

Unify Actual vs Planned Hours

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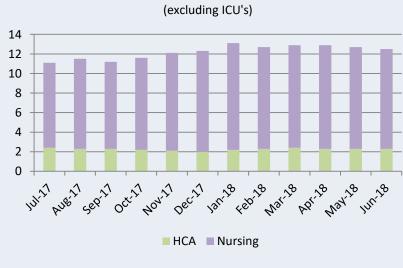
Actual vs Planned has increased from 103.2% in May to 104.2% in June. Nursing hours during the day were 116.2% against plan and 99.4% at Night.

The trend for June was 104.2% therefore within safe staffing parameters.

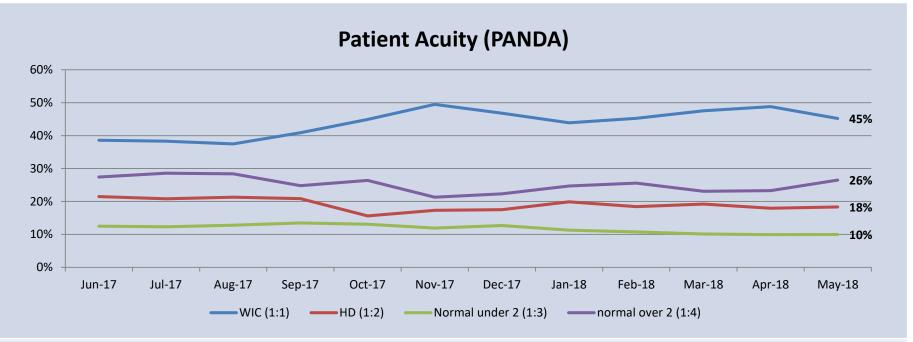
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Care Hours Per Patient Day

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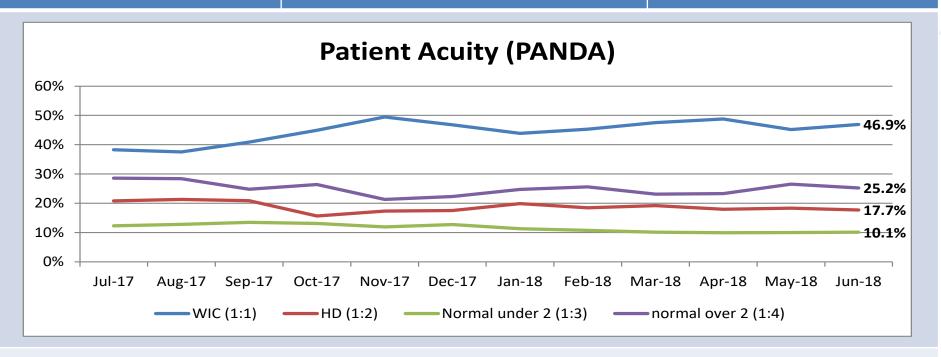
CHPPD for June was 12.5. This is slightly lower than in May but compares favourably to the same month last year (11.8). This figure is an indication of "care" hours given to patients, so if the total was 24, that indicates every patient received 1:1 nursing, the figures for June indicate that patients received, on average 1:2 nursing. This is used to reflect the activity on each ward and the staffing levels required. These results cannot be taken in isolation but is compared to the Unify results to ensure that safe staffing was achieved.



PANDA acuity data measures patient dependency based on the actual acuity and dependency of children. These are the following categories that are evaluated:

- Normal dependency Under 2 Years 1 Nurse: 3 Patients
- Normal dependency Over 2 Years 1 Nurse: 4 Patients
- Ward High Dependency (HD) 1 Nurse: 2 Patients
- Ward Intensive Care (WIC) 1 Nurse: 1 Patient

The trend in patient acuity requiring a nurse to patient ratio of 1:1or 1:2 level of care has been consistent over the last few months and is currently reporting at 64%, which is higher than the same month last year (59%). Patients with normal dependency of 1:3 and 1:4 were 36% of the total reported in May. This is a trend that is continually reviewed and discussed to ensure that correct numbers and skill mix of staff are available for the needs of the wards and departments.

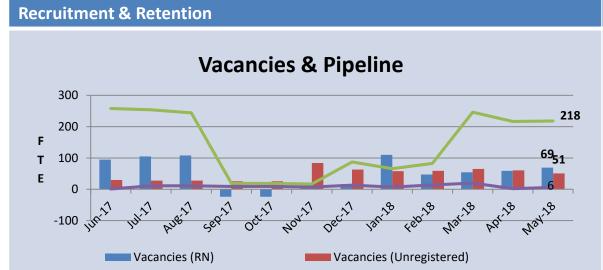


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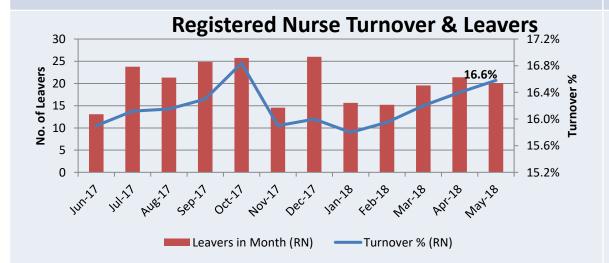
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The trend in patient acuity requiring a nurse to patient ratio of 1:1or 1:2 level of care has been consistent over the last few months and is currently reporting at 64.6%, which is higher than the same month last year (59%). Patients with normal dependency of 1:3 and 1:4 were 35.3% of the total reported in June. This is a trend that is continually reviewed and discussed to ensure that correct numbers and skill mix of staff are available for the needs of the wards and departments.

Pipeline recruits (RN)



Pipeline recruits (unregistered)



Comments

The RN Vacancy rate for May was 4.4%, which was a slight increase from the previous month (3.7%), but is well below the set Trust target of 10% target and the same month last year (6.1%).

Unregistered Vacancies are currently 16% (51 WTE). There are ongoing plans including local and central recruitment and

The Recruitment pipeline includes 159 Newly Qualified Nurses who will join the Trust in September.

The new Recruitment and Retention Action Plan has been finalised and the highlights will be presented at the Operational, Development and Performance Group for their information in June.

Turnover has been increasing over the last few months, which is an expected seasonal trend, but remains below target.

Of the leavers in the last twelve months identified reasons for leaving include: - relocation (36%) and work life balance (22%).

The Workforce Advisory Board (WAB) format has been modified to a new interactive format. The WAB now discusses Nursing recruitment and retention strategies as part of a wider retention piece. A monthly update showing the highlights and the next month Action plan is attached to this report and is now sent to all staff as an update.

Recruitment & Retention

Vacancies & Pipeline 300 250 223 200 F 150 T 82 100 Ε 50 -50 Vacancies (RN) Vacancies (Unregistered) Pipeline recruits (RN) Pipeline recruits (unregistered)

Voluntary Turnover & Leavers



Comments

The RN Vacancy rate for June was 5.2%, which was a slight increase from the previous month (4.4%), but is well below the set Trust target of 10% target and the same month last year (6.1%).

Unregistered Vacancies are currently 17% (54 WTE). There are ongoing plans including local and central recruitment and the recruitment pipeline includes 154 Newly Qualified Nurses who will join the Trust in September.

The new Recruitment and Retention Action Plan has been finalised and the highlights was presented at the Operational, Development and Performance Group for their information in June.

Turnover has been increasing over the last few months, which is an expected seasonal trend, and the figure shows the trend over the last year, where as the number of leavers is on a downward trend.

Of the leavers in the last twelve months identified reasons for leaving include: - relocation (39%) and work life balance (24%). The WAB is currently focusing on retention strategies as part of a wider workforce strategy. There is a review of the Clinical Nurse Specialists and Advanced/Nurse and Trainee Practitioners to understand the role and the current skill resource available to the Trust workforce.



Nursing & HCA Safe Staffing- May/ June 2018

Division	Actual vs Planne d %	CHPPD (exc ICUs)	RN Vacancies %	RN Vacancies (FTE)	Pipeline (No.)	Turnover %	Sickness %	Maternity %
JM Barrie May. June	102% 105.4%	13.1 12.3	5.2% 4.7%	41.75 37.6	n/a n/a	13.7% 12.6%	3.1% 3.1%	3.8% 4.6%
Charles West May. June.	108.4% 106.1%	13.4 12.9	0.3% 2.9%	1.5 17.2	n/a n/a	19.7% 19.0%	3.0% 3.0%	3.3% 3.4%
IPP May June	97.8% 89.4%	14.2 11.4	16.4% 21%	18.1 23.1	n/a	13.5% 14.9%	2.8% 2.5%	4.3% 2.3%
Trust May June	103.6% 104.2%	12.7 12.7	3.5% 5.2%	51 82.0	218 223	16.6% 15.7%	3.0% 3.0%	3.8% 4.1%

IPP will be the focus of any initiative for recruitment. In the pipeline already are adverts and offers to HM Forces, (see Appendix 1). A collaborative work stream is being developed to encourage personnel leaving the Services to consider Great Ormond Street as a career opportunity.