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| Trust Board 7 December 2016 | |
| Safe Nurse Staffing Report for September and October 2016 Submitted by: Juliette Greenwood Chief Nurse | Paper No: Attachment J |
| 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: <ul style="list-style-type: none"> – 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. – The information on nurse retention plans. | |
| 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. <i>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. In July 2016 there was further guidance – Supporting NHS providers to deliver the right staff, with the right skills, in the right place at the right time (National Quality Board, July 2016). This guidance provides an updated set of NQB expectations for nurse staffing to help Trust boards make local decisions that will deliver high quality care for patients within the available staffing resource.</i> | |
| Financial implications Already incorporated into 16/17 Division budgets | |
| Who needs to be told about any decision? <ul style="list-style-type: none"> – Divisional Management Teams – Finance Department – Workforce Planning | |
| 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 SEPTEMBER AND OCTOBER 2016

1. Introduction

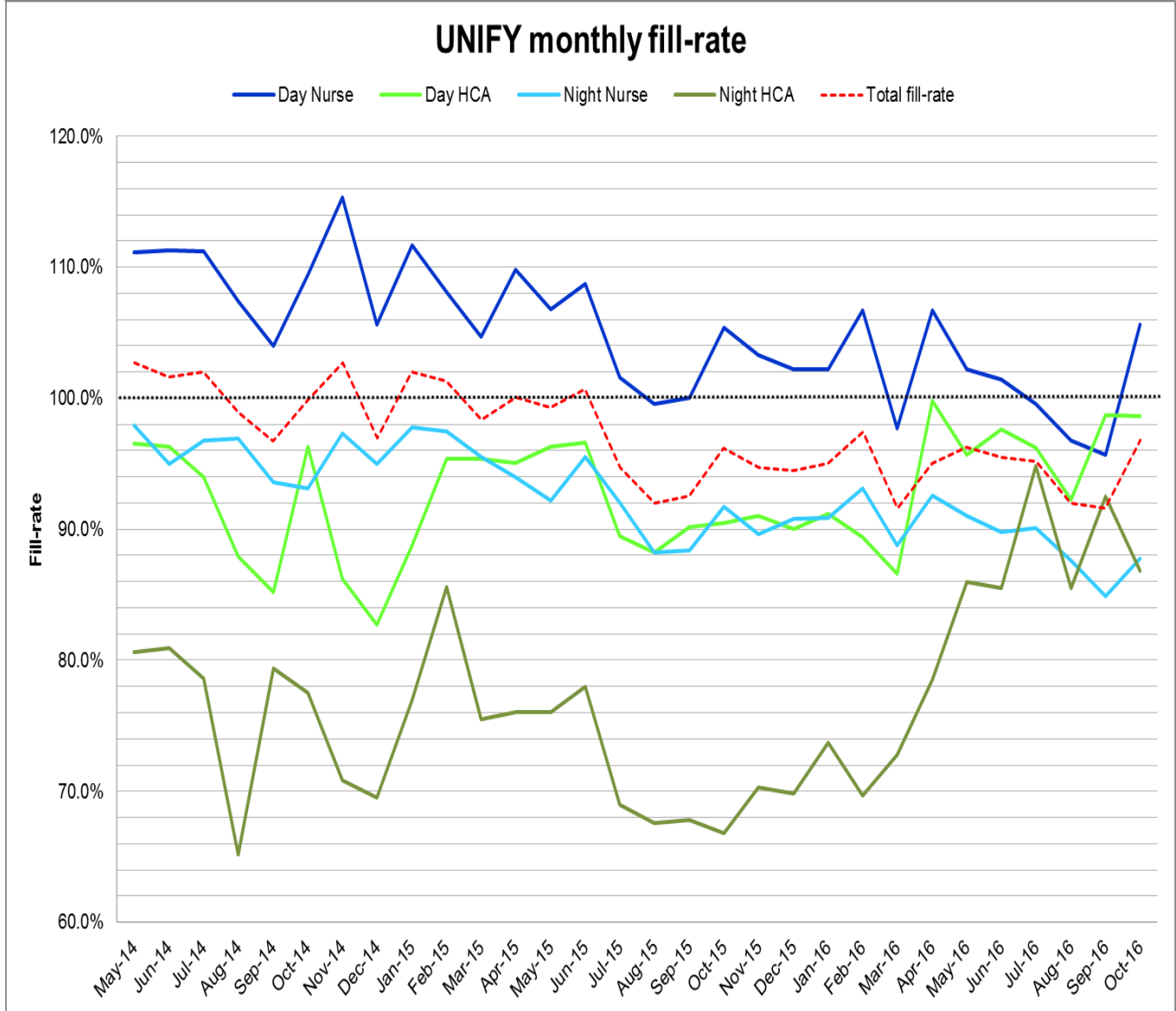
- 1.1** This report on GOSH Safe Nurse Staffing contains information from the month of September and October 2016. The report provides information on staff in post, safe staffing incidents and nurse vacancies and includes quality measures which are reported by exception.
- 1.2** The expectation is the 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:
- The number of staff on duty the previous month compared to planned staffing levels.
 - 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.
 - The reporting of Care Hours per Patient Day (CHPPD).
 - 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 September and October is attached as Appendix 1. The spread sheet contains:
- Total monthly planned staff hours; the Divisional Assistant Chief Nurses and Matrons 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 September and October are:

| | RN Day | RN Night | HCA Day | HCA Night | Total Fill Rate |
|------------------|----------|----------|---------|-----------|-----------------|
| August | 96.8% ↓ | 87.6% ↓ | 92.3% ↓ | 85.5% ↓ | 92.0% ↓ |
| September | 95.7% ↓ | 84.9% ↓ | 98.7% ↑ | 92.5% ↑ | 91.6% ↓ |
| October | 105.6% ↑ | 87.8% ↑ | 98.6% ↓ | 86.8% ↓ | 96.8% ↑ |



- The increase in the fill rate between September and October reflects the number of new nurses starting employment who are counted in the numbers once they have completed their induction and supernumerary period, across the inpatient wards in the Trust.
- The number of new starters in September and October are:
 - o 145 Newly Qualified Nurses
 - o 20 Experienced Nurses
 - o 19 Healthcare Support Workers

Charles West, IPP and JM Barrie – no unsafe shifts reported in September and October

| Charles West | September | October |
|---------------------------------------|---|--|
| Badger Ward | The ward has a number of NQNs who have just started and in their supernumerary period. | These posts have now be filled by NQNs |
| Bear Ward | | The ward is under-established in care staff, plus one staff member on long term sick. No shifts were unsafe. |
| Flamingo Ward | The ward has a number of vacant HCA posts which could not be filled by Bank | A number of HCA posts have been recruited to but there are still some vacancies. |
| Miffy Ward (TCU) | More registered nurses are used to cover the day shifts to match patient demand. | Staff has been moved to support as required. |
| Neonatal Intensive Care Unit | NICU doesn't often use HCA's which is currently being reviewed. There was also an increase in staff sickness. | |
| Paediatric Intensive Care Unit | | Higher dependency of children; including children on ECMO and extra cubicle capacity |
| Elephant Ward | Day HCA: Patients with increased care demand. | Slightly over the 10% due to increase of activity |
| Fox Ward | Significant number of registered nurse vacancies (RN23%), therefore, 2 beds closed for the medium term. Increased use of HCAs to support the registered staff. | Still a number of nurse vacancies and increased sickness. Increase use of HCAs as an increase in children requiring HCA care e.g. Tracheostomies |
| Giraffe Ward | Increased patient acuity & dependency, resulting in increased use of Bank staff. | Staff have been moved across the floor , increase in HCAs as Bank unable to fill requirement for trained staff |
| Lion Ward | Lower than usual in-patient activity. Ward beds not fully occupied on some shifts. HCA Day: Increased use of HCAs to support registered staff on some shifts | Increase in terminal ill children requiring more care support. |
| Penguin Ward | Rosterpro records both Penguin In-patients & Penguin Ambulatory workforce. | Increase in HCA's to support ambulatory activity. The error in recording on Rosterpro is being investigated |
| Robin Ward | Significant number of registered nurse vacancies (RN15%), therefore, 2 beds closed for the medium term. Increased use of HCAs to support the registered staff. | Increase in HCA to support the team |

| IPP | September | October |
|--------------------|--|--|
| Butterfly | | Reduced registered nursing staff on nights, as the ward have had a large number of day cases. |
| Bumblebee | | Qualified staffing levels above planned numbers as new starters were in the supernumerary period. |
| Hedgehog | | Qualified staffing levels above planned numbers as new starters were in the supernumerary period. |
| JM Barrie | September | October |
| Sky | | A number of nurse vacancies resulting in 2 bed closures. |
| Rainforest Gastro | We currently have 2 nurses as supernumerary and they come out of our supernumerary period at the end of this month. A number of HCA vacancies with new starters in the pipeline | |
| Mildred Creek Unit | | Some sickness with the HCA equivalents. |
| Kingfisher | | Kingfisher has 7 supernumerary nurses and an increase in short term sickness. One HCA on long term sick and one on maternity leave, who the cover post also left the trust. |
| Koala | | The variation of 130% is due to there being an increased number of invasive in telemetry which require 1:1 registered nursing care for the first 24-48 hrs. |

2.1.3 Care Hours per Patient Day (CHPPD)

From May 2016 Trusts began reporting monthly CHPPD data to NHS Improvement and is included in the Planned vs Actual hours report. Over time it is hoped this data will be used to enable national benchmarking with other organisations on a ward speciality basis to ensure effective and efficient staffing levels and allow trusts to review internally the deployment of staff within a speciality and by comparable ward.

Appendix 5 shows the last 5 months reporting of CHPPD. This data is only for the inpatient wards and excluding any day case beds. The data is broken down by registered and non-registered staffing for each ward; it also compares each ward to the current Trust average hours (including and excluding ITU CHPPD). There is still no national guidance on what the CHPPD should be for specialist hospitals.

Or the month of October there was an increase in the CHPPD on: PICU; Fox; Penguin; Kingfisher; Koala and Bumblebee.

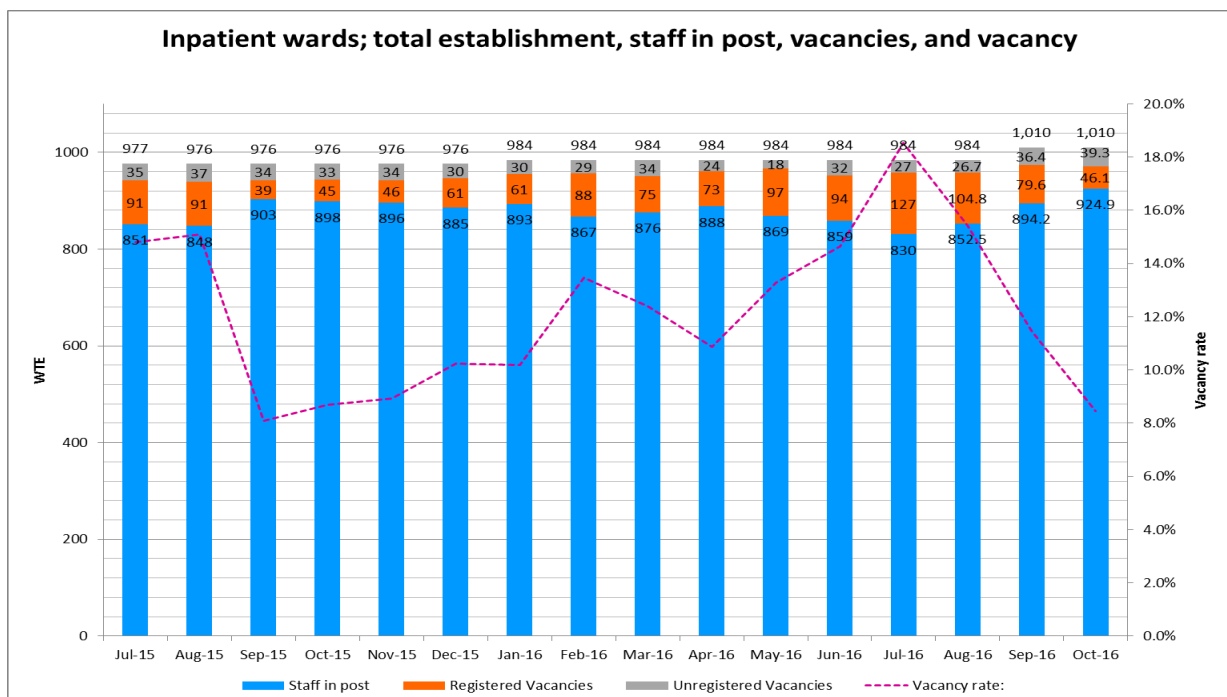
2.1.4 The Clinical Site Practitioners (CSPs) confirm that no ward was declared unsafe in September and October. 11 shifts were reported as being short of staff but safety was not compromised.

3.1 General Staffing Information

- 3.1.1 Appendix 3 and 4 – Ward Nurse Staffing overview for September and October. The table provides information on staff in post, vacancies and staff in the recruitment pipeline and includes bed closure information.
- 3.1.2 An average 9 out of 23 inpatient wards closed beds at various points during September and October with an average number of 12.3 beds closed each day in September and 18.6 beds closed in October which is a significant increase from the 9.9 beds closed in August. Of these bed closures 6.5 were closed for maintenance work/redecoration and the rest related to staffing levels either for vacancies or where nurses are still in their supernumerary period and sickness,
- 3.1.3 For the inpatient wards, at 1st November 2016, the registered and non-registered vacancies totalled 85.4WTE, a decrease from 131.5WTE on 1st September. This breaks down to: 46.1 registered nurse vacancies and 39.3 non-registered (HCA) vacancies. It should be noted though the number of vacancies have reduced, the newly recruited staff needed to complete induction and their supernumerary period and receive their MNC registration pin before they are counted in the ward numbers.

3.2 Recruitment

- 3.2.1 145 Newly qualified nurses started in the Trust in September, 30 experienced nurse and 39 Healthcare Assistants/Healthcare Support workers have started in the last two months.
- 3.2.2 A very successful open day was held on the 13th Octobers 2016 with 206 attendees. A number of assessment centres are planned to take place in November 2016 and March 2017, to interview NQNs qualifying in March 2017 and August 2017 respectively. The assessment centres have been planned earlier in the year, than in previous years, to ensure nurses who are about to qualify know earlier on in the year if they have been successful in securing a job at GOSH and before they have job offers from other organisations. The next open day is planned for February 2017.



3.2.3 Clinical Band 2-4 (Unregistered)

The first cohort of Band 2 trainee Healthcare Support workers (HCSW) started in September on a training programme with the expectation that within 12 – 18 months they will meet both the HCA Band 3 education requirements and be clinical competent to care for CYP in a healthcare setting. This forms part of the unregistered workforce Talent for Care strategy ensuring staff have clear career development pathway and have the right skills to deliver high quality care.

A further 18 Healthcare Support Workers (Band 2) and Healthcare Assistants (Band 3) were successful in the October assessment centre and should be starting in post on 5th December 2016.

3.3 Retention

3.3.1 Despite significant continuously focused recruitment activity there remains a shortfall in the number of nurses applying for and being employed at GOSH which impacts on service delivery. A programme of work has therefore been launched that will not only focus on recruitment of nurses but also on retaining them and reducing turnover.

3.3.2 The overall programme objectives are to build on the Trust's Always Values and to work with the divisional teams to:

- To become a recognised 'Nurse Friendly' organisation.
- To implement a culture change to ensure the right nurses are recruited into the right roles at the right time and are valued and feel part of their team.
- To attract and retain a high quality nursing workforce
- To develop a nursing community for current and future GOSH nurse
- To actively contribute to the London wide 'Capital Nurse project and maximise the benefits and opportunities it presents.
- To develop 'best in class' HR processes that actively facilitates achievement of the recruitment and retention objectives.

3.3.3 Appendix 6 & 7 details the summary of these two workstreams and provides an update on the achievements and actions for October 2016.

3.4 Key Challenges

- Recruitment of experienced Band 5 and Band 6 Nurses.
- Retention of Band 5 and 6 Nurses.

4. Key Quality and Safety Measures and Information

4.1 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 September and October 2016.

4.2 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 Assistant Chief Nurses , and the HON for IPP and their review processes.

4.3 Infection control – September and October

| Infection | Number of incidents | |
|--|------------------------|------------------------|
| | September | October |
| C diff's | nil | Data not yet available |
| MRSA bacteraemias | 1 | 0 |
| MSSA bacteraemias | 1 | 1 |
| E.coli bacteraemias | Nil | 2 |
| Outbreaks and whether any beds closed | Nil | 1 (no beds closed) |
| Carbapenemase-producing Enterobacteriaceae | 1 confirmed; 1 pending | 6 |
| Hospital acquired enteric virus infections | 8 | 9 |
| Hospital acquired viral respiratory infections | 5 | 5 |

4.4 Pressure ulcers – September (6 incidents) and October (10 incidents)

| Date | Ward / Area | Grade | Site | Cause | Avoidable/Unavailable |
|------------------|-------------|-------|-------------|---------------------------|--|
| SEPTEMBER | | | | | |
| 05/09/2016 | CICU | 2 | R side Neck | Device-Neckline | Unavoidable |
| 07/09/2016 | PICU | 2 | L ear | Device-CPAP strap | Avoidable |
| 07/09/2016 | PICU | 2 | Both heels | Pressure & poor perfusion | Unavoidable- this patient was very unstable & unable to be moved when on CVVH and all preventative measures were put in place. The areas progressed to suspected deep tissue injury but full depth of damage unknown as patient has since deceased. Discussed with Rachael Metcalfe from Risk team-no action required. |
| 09/09/2016 | Squirrel | 2 | L heel | Pressure | Avoidable |
| 29/09/2016 | CICU | 2 | R ear | Pressure | Avoidable |
| 30/09/2016 | PICU | 2 | L ear | Pressure | Avoidable |

| OCTOBER | | | | | |
|------------|-----------|-----|--------------------|---------------------------|-------------|
| 10/10/2016 | Bumblebee | 2 | Neck- | Tracheostomy tapes | Avoidable |
| 10/10/2016 | Miffy | 2x2 | Neck-R side & back | Device-Tracheostomy tapes | Avoidable |
| 10/10/2016 | Squirrel | 2 | L upper arm | Pressure | Avoidable |
| 10/10/2016 | Badger | 2 | Neck-R side | Device-Tracheostomy tapes | Avoidable |
| 10/10/2016 | Elephant | 2 | R ear | Pressure | Unavoidable |
| 13/10/2016 | Bear | 2 | Nostril | Device-NG tube | Avoidable |
| 13/10/2016 | Sky | 2 | R heel | Device-POP | Unavoidable |
| 18/10/2016 | Bear | 2 | Toe | Device-Sao2 probe | Avoidable |
| 21/10/16 | Bear | 2 | Nostril | Device-NG tube | Avoidable |
| 21/10/16 | NICU | 3 | Occiput | Pressure | Unavoidable |

Narrative/Comments:

No further information has been received

4.5 Deteriorating patient

| Event | September | October | Number of Preventable |
|------------------------------|-----------|---------|-----------------------|
| 2222 calls | 14 | 10 | |
| Cardiac Arrests | 2 | 2 | 0 |
| Respiratory Arrests | 0 | 0 | |
| Unplanned admissions to ITUs | 0 | 0 | |

Narrative/comments:

Significant reduction in the number of calls compared to August and all events were well managed

4.6 Safety incidents reported about inadequate nurse staffing levels

There were 16 Datix submitted by staff regarding shortages of nurse for September and October: One for Fox ward in September, relating to an increase in patient acuity with 3 patients requiring 1:1 nursing. 15 Datix were received from Woodpecker ward, 9 in September and 6 in October, all relating to there being insufficient staff on shift to take patients to and from theatres. All cases were appropriately escalated and actions were taken to mitigate concerns, no adverse incidents occurred and no negative comments were received from the FFT.

4.7 Pals concerns raised by families regarding nurse staffing

The Trust received no PALs referrals in regards to nurse safe staffing for September and October 2016.

4.8 Complaints received regarding nurse safe staffing.

The Trust received no complaints regarding it's Nurse staffing staffing levels in September and October.

4.9 Friends and family test (FFT) data

4.9.1 September:

Overall response rate for September 2016 has decreased to 14.1% (data extracted 17/10/2016) compared to 17.2% in August 2016. The target response rate is currently 40%.

- The overall percentage to recommend score is 99% (data extracted 17/10/2016).
- Families that were extremely likely to recommend GOSH to their friends and family equalled 89% (374) and 10% (41) responded as likely to recommend in September 2016 compared with 90% (470) and 8% (42) in August 2016.
- For information, the following negative comments or suggestions regarding staffing issues/staff behaviour have been received for the following wards.

| Response | Ward/Area | Comment related to response |
|------------------|------------|---|
| Extremely Likely | Safari Day | I think this ward could do with a higher staff ratio after being over different wards. This is consistently very busy. The nurses work extremely hard |

- The following sample the positive comments regarding outstanding performance regarding staff behaviour which have been received:

| Response | Ward/Area | Comment related to response |
|------------------|--------------------------|---|
| Extremely Likely | Bear | Although our admission came a bit sooner than expected, the care given to both (family name) and I as parents, and our son (patient name), was exceptional! |
| Extremely Likely | Clinic Research Facility | First class care. All staff care about the patient. |
| Extremely Likely | Eagle Acute | ALL staff are the best! |
| Extremely Likely | Walrus | The staff have been warm and friendly, making sure (patient name) felt at ease and nothing has been too much bother. Thank you! |

4.9.2 October:

Overall response rate for October 2016 has increased to 25.2% (data extracted 15/11/2016) compared to 14.1% in September 2016. The target response rate is currently 40%.

- The overall percentage to recommend score is 98% (data extracted 15/11/2016).
- Families that were extremely likely to recommend GOSH to their friends and family equalled 89% (626) and 9% (63) responded as likely to recommend in October 2016 compared with 89% (374) and 10% (41) in September 2016.
- For information, the following negative comments or suggestions regarding staffing issues/staff behaviour have been received for the following wards.

| Ward/Area | Comment related to response |
|-----------|--|
| Bear | Bad = Low staffing, especially at night which impacts on patient care. Night nurses not that visible on ward, takes a long time to come to attend to your request. |
| Bumblebee | However all the time shortage of nurses. |

- The following sample the positive comments regarding outstanding performance regarding staff behaviour which have been received:

| Ward/Area | Comment related to response |
|------------------|--|
| Butterfly | We were treated so well by everyone. |
| CICU Flamingo | The doctors and nursing staff have been totally amazing. |
| Hedgehog | We can't thank the staff enough. |
| Koala | excellent patient care as always |

5. Conclusion

5.1 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 September and October, 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.

6. Recommendations

The Board of Directors are 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.
- The successful recruitment of newly qualified nurses

- The on-going challenges in recruiting experienced nurses.
- The commencement of the Band 2 Healthcare Support Worker training programme
- The launch of the recruitment and retention programmes of work.

| Only complete sites your organisation is accountable for | | | | Day | | | | Night | | | | Day | | Night | | Care Hours Per Patient Day (CHPPD) | | | | |
|--|---------------------------------|--------------------------------|---------------------------------------|---------------------------------------|-----------------------------------|----------------------------------|-----------------------------------|----------------------------------|-----------------------------------|----------------------------------|-----------------------------------|----------------------------------|--|------------------------------------|--|------------------------------------|---|----------------------------|------------|---------|
| Hospital Site Details | | Ward name | Main 2 Specialties on each ward | | 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 (%) | Cumulative count over the month of patients at 23:59 each day | Registered midwives/nurses | Care Staff | Overall |
| Site code *The Site code is automatically populated when a Site name is selected | Hospital Site 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 CE | Badger Ward | 340 - RESPIRATORY MEDICINE | | 2323 | 2032.6 | 345 | 165.25 | 2070 | 1775.65 | 345 | 189.2 | 87.5% | 47.9% | 85.8% | 54.8% | 334 | 11.4 | 1.1 | 12.5 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Bear Ward | 170 - CARDIOTHORACIC SURGERY | 321 - PAEDIATRIC CARDIOLOGY | 2746 | 2796.35 | 595 | 622 | 2746 | 2543.4 | 343 | 293.7 | 101.8% | 104.5% | 92.6% | 85.6% | 642 | 8.3 | 1.4 | 9.7 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Flamingo Ward | 192 - CRITICAL CARE MEDICINE | | 6808 | 7087.25 | 345 | 149.5 | 6405 | 6242.87 | 195 | 43.2 | 104.1% | 43.3% | 97.5% | 22.2% | 560 | 23.8 | 0.3 | 24.1 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Miffy Ward (TCU) | 340 - RESPIRATORY MEDICINE | | 690 | 831 | 1035 | 866.5 | 690 | 451.2 | 690 | 707 | 120.4% | 83.7% | 65.4% | 102.5% | 144 | 8.9 | 10.9 | 19.8 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Neonatal Intensive Care Unit | 192 - CRITICAL CARE MEDICINE | | 3105 | 3063.7 | 345 | 57.5 | 3105 | 2743.8 | 0 | 32.4 | 98.7% | 16.7% | 88.4% | - | 231 | 25.1 | 0.4 | 25.5 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Paediatric Intensive Care Unit | 192 - CRITICAL CARE MEDICINE | | 5793 | 5874 | 340 | 103.5 | 5793 | 5172.2 | 340 | 0 | 101.4% | 30.4% | 89.3% | 0.0% | 356 | 31.0 | 0.3 | 31.3 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Elephant Ward | 370 - MEDICAL ONCOLOGY | 823 - HAEMATOLOGY | 1624 | 1644.5 | 343 | 391 | 1372 | 1141.8 | 343 | 351.9 | 101.3% | 114.0% | 83.2% | 102.6% | 302 | 9.2 | 2.5 | 11.7 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Fox Ward | 303 - CLINICAL HAEMATOLOGY | 313 - CLINICAL IMMUNOLOGY and ALLERGY | 1693 | 1437.5 | 282 | 402.5 | 1571 | 1229.7 | 282 | 370.7 | 84.9% | 142.7% | 78.3% | 131.5% | 272 | 9.8 | 2.8 | 12.6 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Giraffe Ward | 313 - CLINICAL IMMUNOLOGY and ALLERGY | 350 - INFECTIOUS DISEASES | 1035 | 1264.3 | 345 | 253 | 1035 | 780.45 | 345 | 419.9 | 122.2% | 73.3% | 75.4% | 121.7% | 196 | 10.4 | 3.4 | 13.9 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Lion Ward | 370 - MEDICAL ONCOLOGY | 303 - CLINICAL HAEMATOLOGY | 1633 | 1326.15 | 345 | 414 | 1380 | 792.4 | 345 | 245.05 | 81.2% | 120.0% | 57.4% | 71.0% | 277 | 7.6 | 2.4 | 10.0 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Penguin Ward | 330 - DERMATOLOGY | 410 - RHEUMATOLOGY | 928 | 1034 | 339 | 736.43 | 679 | 624.4 | 339 | 87.1 | 111.4% | 217.2% | 92.0% | 25.7% | 144 | 11.5 | 5.7 | 17.2 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Robin Ward | 350 - INFECTIOUS DISEASES | 313 - CLINICAL IMMUNOLOGY and ALLERGY | 1564 | 1269.2 | 272 | 379.5 | 1364 | 1030.6 | 272 | 406.05 | 81.2% | 139.5% | 75.6% | 149.3% | 230 | 10.0 | 3.4 | 13.4 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Bumblebee Ward | 171 - PAEDIATRIC SURGERY | 420 - PAEDIATRICS | 2205 | 1837.25 | 315 | 895.75 | 1890 | 1723.2 | 630 | 1064.7 | 83.3% | 284.4% | 91.2% | 169.0% | 496 | 7.2 | 4.0 | 11.1 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Butterfly Ward | 370 - MEDICAL ONCOLOGY | 420 - PAEDIATRICS | 2421 | 2062.5 | 302 | 725.25 | 1816 | 1285.7 | 302 | 418.1 | 85.2% | 240.1% | 70.8% | 138.4% | 380 | 8.8 | 3.0 | 11.8 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Eagle Ward | 361 - NEPHROLOGY | | 2223 | 1853.45 | 687 | 608 | 1375 | 1157.65 | 343 | 284.3 | 83.4% | 88.5% | 84.2% | 82.9% | 312 | 9.7 | 2.9 | 12.5 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Kingfisher Ward | 420 - PAEDIATRICS | | 1748 | 1591.4 | 897 | 456.75 | 312 | 427.5 | 0 | 11.5 | 91.0% | 50.9% | 137.0% | - | 192 | 10.5 | 2.4 | 13.0 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Rainforest Ward (Gastro) | 301 - GASTROENTEROLOGY | | 943 | 1150.3 | 690 | 431.5 | 690 | 575.2 | 690 | 272.5 | 122.0% | 62.5% | 83.4% | 39.5% | 201 | 8.6 | 3.5 | 12.1 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Rainforest Ward (Endo/Met) | 302 - ENDOCRINOLOGY | | 1035 | 1140.3 | 690 | 357.7 | 1035 | 666.1 | 345 | 306.6 | 110.2% | 51.8% | 64.4% | 88.9% | 210 | 8.6 | 3.2 | 11.8 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Mildred Creak | 711 - CHILD and ADOLESCENT PSYCHIATRY | | 1087 | 1014.35 | 606 | 708.15 | 492 | 389.5 | 442 | 430.3 | 93.3% | 116.9% | 79.2% | 97.4% | 265 | 5.3 | 4.3 | 9.6 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Koala Ward | 150 - NEUROSURGERY | 421 - PAEDIATRIC NEUROLOGY | 3188 | 2937.1 | 336 | 501.5 | 3076 | 2515.6 | 336 | 87.8 | 92.1% | 149.3% | 81.8% | 26.1% | 591 | 9.2 | 1.0 | 10.2 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Peter Pan Ward | 120 - ENT | 160 - PLASTIC SURGERY | 1501 | 1125.25 | 582 | 506.5 | 1389 | 1033.7 | 0 | 89.15 | 75.0% | 87.0% | 74.4% | - | 321 | 6.7 | 1.9 | 8.6 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Sky Ward | 110 - TRAUMA & ORTHOPAEDICS | 171 - PAEDIATRIC SURGERY | 1738 | 1669.5 | 606 | 854.05 | 1687 | 1369 | 0 | 0 | 96.1% | 140.9% | 81.1% | - | 384 | 7.9 | 2.2 | 10.1 |
| RP401 | GREAT ORMOND STREET HOSPITAL CE | Squirrel Ward | 171 - PAEDIATRIC SURGERY | 101 - UROLOGY | 2869 | 2646.49 | 677 | 587 | 2564 | 2137.73 | 0 | 295.1 | 92.2% | 86.7% | 83.4% | - | 459 | 10.4 | 1.9 | 12.3 |

Appendix 2: UNIFY Safe Staffing Submission – October 2016

| Hospital Site Details | | Ward name | Main 2 Specialties on each ward | | 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 (%) | Cumulative count over the month of patients at 23:59 each day | Registered midwives/nurses | Care Staff | Overall |
|--|----------------------------------|--------------------------------|---------------------------------------|---------------------------------------|-----------------------------------|----------------------------------|-----------------------------------|----------------------------------|-----------------------------------|----------------------------------|-----------------------------------|----------------------------------|--|------------------------------------|--|------------------------------------|---|----------------------------|------------|---------|
| Site code *The Site code is automatically populated when a Site name is selected | Hospital Site 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 | | 2206 | 2161.75 | 330 | 621 | 1982 | 1705.4 | 330 | 320.25 | 98.0% | 188.2% | 86.0% | 97.0% | 365 | 10.6 | 2.6 | 13.2 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Bear Ward | 170 - CARDIOTHORACIC SURGERY | 321 - PAEDIATRIC CARDIOLOGY | 2837 | 3065.5 | 595 | 540.75 | 2837 | 2970.5 | 354 | 205.9 | 108.1% | 90.9% | 104.7% | 58.2% | 652 | 9.3 | 1.1 | 10.4 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Flamingo Ward | 192 - CRITICAL CARE MEDICINE | | 7015 | 7608.58 | 356 | 241.5 | 6612 | 6373.1 | 195 | 75.6 | 108.5% | 67.8% | 96.4% | 38.8% | 579 | 24.1 | 0.5 | 24.7 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Miffy Ward (TCU) | 340 - RESPIRATORY MEDICINE | | 713 | 781 | 1069 | 855.6 | 713 | 591.6 | 713 | 617.4 | 109.5% | 80.0% | 83.0% | 86.6% | 148 | 9.3 | 10.0 | 19.2 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Neonatal Intensive Care Unit | 192 - CRITICAL CARE MEDICINE | | 3208 | 3271.65 | 356 | 80.5 | 3208 | 2664.52 | 0 | 54 | 102.0% | 22.6% | 83.1% | - | 182 | 32.6 | 0.7 | 33.4 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Paediatric Intensive Care Unit | 192 - CRITICAL CARE MEDICINE | | 5986 | 7351.85 | 352 | 146.75 | 5986 | 5567.78 | 352 | 11.5 | 122.8% | 41.7% | 93.0% | 3.3% | 363 | 35.6 | 0.4 | 36.0 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Elephant Ward | 370 - MEDICAL ONCOLOGY | 823 - HAEMATOLOGY | 1667 | 1902.5 | 356 | 356.5 | 1426 | 1322.2 | 356 | 345.05 | 114.1% | 100.1% | 92.7% | 96.9% | 375 | 8.6 | 1.9 | 10.5 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Fox Ward | 303 - CLINICAL HAEMATOLOGY | 313 - CLINICAL IMMUNOLOGY and ALLERGY | 1863 | 1913.75 | 310 | 388.9 | 1723 | 1166.8 | 310 | 431.3 | 102.7% | 125.5% | 67.7% | 139.1% | 262 | 11.8 | 3.1 | 14.9 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Giraffe Ward | 313 - CLINICAL IMMUNOLOGY and ALLERGY | 350 - INFECTIOUS DISEASES | 1069 | 1240.45 | 356 | 302.5 | 1069 | 859.5 | 356 | 428.2 | 116.0% | 85.0% | 80.4% | 120.3% | 211 | 10.0 | 3.5 | 13.4 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Lion Ward | 370 - MEDICAL ONCOLOGY | 303 - CLINICAL HAEMATOLOGY | 1667 | 1640.15 | 356 | 522.2 | 1426 | 894.3 | 356 | 258.2 | 98.4% | 146.7% | 62.7% | 72.5% | 299 | 8.5 | 2.6 | 11.1 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Penguin Ward | 330 - DERMATOLOGY | 410 - RHEUMATOLOGY | 954 | 1069.7 | 356 | 507.5 | 713 | 662 | 356 | 108 | 112.1% | 142.6% | 92.8% | 30.3% | 175 | 9.9 | 3.5 | 13.4 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Robin Ward | 350 - INFECTIOUS DISEASES | 313 - CLINICAL IMMUNOLOGY and ALLERGY | 1624 | 1303.85 | 286 | 278.05 | 1430 | 975.7 | 286 | 349.25 | 80.3% | 97.2% | 68.2% | 122.1% | 238 | 9.6 | 2.6 | 12.2 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Bumblebee Ward | 171 - PAEDIATRIC SURGERY | 420 - PAEDIATRICS | 2107 | 2003.65 | 301 | 965.5 | 1806 | 1925.35 | 602 | 970.3 | 95.1% | 320.8% | 106.6% | 161.2% | 405 | 9.7 | 4.8 | 14.5 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Butterfly Ward | 370 - MEDICAL ONCOLOGY | 420 - PAEDIATRICS | 2527 | 1961 | 315 | 602.5 | 1895 | 1054.3 | 315 | 361.2 | 77.6% | 191.3% | 55.6% | 114.7% | 337 | 8.9 | 2.9 | 11.8 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Eagle Ward | 361 - NEPHROLOGY | | 2253 | 2041.5 | 709 | 669.5 | 1418 | 1305.1 | 354 | 286.95 | 90.6% | 94.4% | 92.0% | 80.8% | 350 | 9.6 | 2.7 | 12.3 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Kingfisher Ward | 420 - PAEDIATRICS | | 1733 | 1362.05 | 895 | 483 | 312 | 416 | 0 | 11.5 | 78.6% | 54.0% | 133.3% | - | 131 | 13.6 | 3.8 | 17.3 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Rainforest Ward (Gastro) | 301 - GASTROENTEROLOGY | | 954 | 1217.75 | 713 | 322 | 713 | 648.7 | 713 | 228.25 | 127.6% | 45.2% | 91.0% | 32.0% | 229 | 8.2 | 2.4 | 10.6 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Rainforest Ward (Endo/Met) | 302 - ENDOCRINOLOGY | | 1050 | 1085.3 | 700 | 333.5 | 1050 | 619.1 | 350 | 254.7 | 103.4% | 47.6% | 59.0% | 72.8% | 229 | 7.4 | 2.6 | 10.0 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Mildred Creak | 711 - CHILD and ADOLESCENT PSYCHIATRY | | 1106 | 1166.35 | 592 | 668.05 | 507 | 367.2 | 454 | 464.8 | 105.5% | 112.8% | 72.4% | 102.4% | 276 | 5.6 | 4.1 | 9.7 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Koala Ward | 150 - NEUROSURGERY | 421 - PAEDIATRIC NEUROLOGY | 2805 | 3645.7 | 299 | 518 | 2728 | 2515.8 | 299 | 123.7 | 130.0% | 173.2% | 92.2% | 41.4% | 538 | 11.5 | 1.2 | 12.6 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Peter Pan Ward | 120 - ENT | 160 - PLASTIC SURGERY | 1543 | 1481.25 | 594 | 347.5 | 1451 | 1159.5 | 0 | 20.55 | 96.0% | 58.5% | 79.9% | - | 321 | 8.2 | 1.1 | 9.4 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Sky Ward | 110 - TRAUMA & ORTHOPAEDICS | 171 - PAEDIATRIC SURGERY | 1793 | 2424.6 | 631 | 969.62 | 1752 | 1534 | 0 | 0 | 135.2% | 153.7% | 87.6% | - | 384 | 10.3 | 2.5 | 12.8 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Squirrel Ward | 171 - PAEDIATRIC SURGERY | 101 - UROLOGY | 2920 | 2800.62 | 699 | 646.5 | 2638 | 2422.4 | 0 | 217.4 | 95.9% | 92.5% | 91.8% | - | 543 | 9.6 | 1.6 | 11.2 |
| RP401 | GREAT ORMOND STREET HOSPITAL CEN | Hedgehog Ward | 420 - PAEDIATRICS | | 1140 | 1204.5 | 285 | 276 | 865 | 877.6 | 285 | 227.5 | 105.7% | 96.8% | 102.6% | 79.8% | 168 | 12.4 | 3.0 | 15.4 |

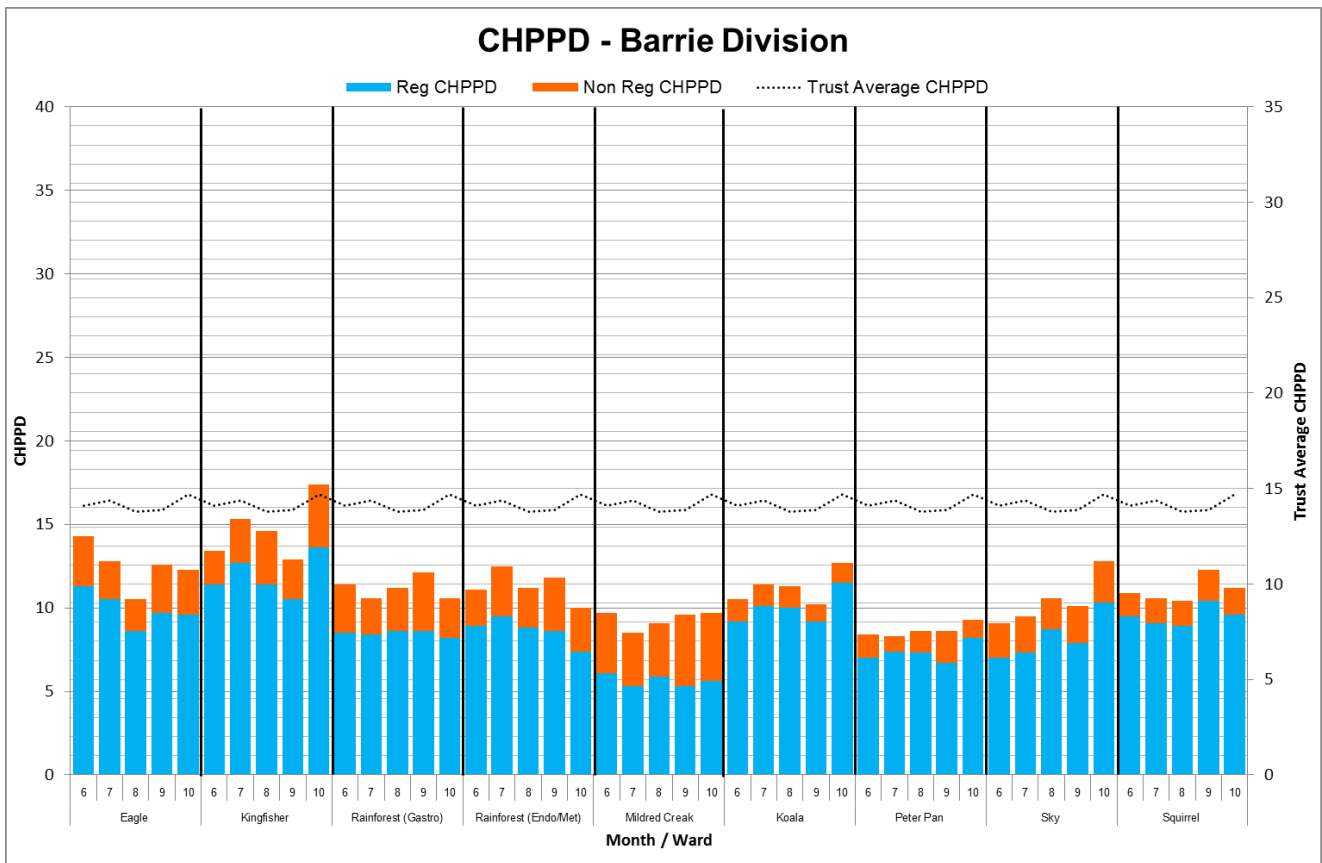
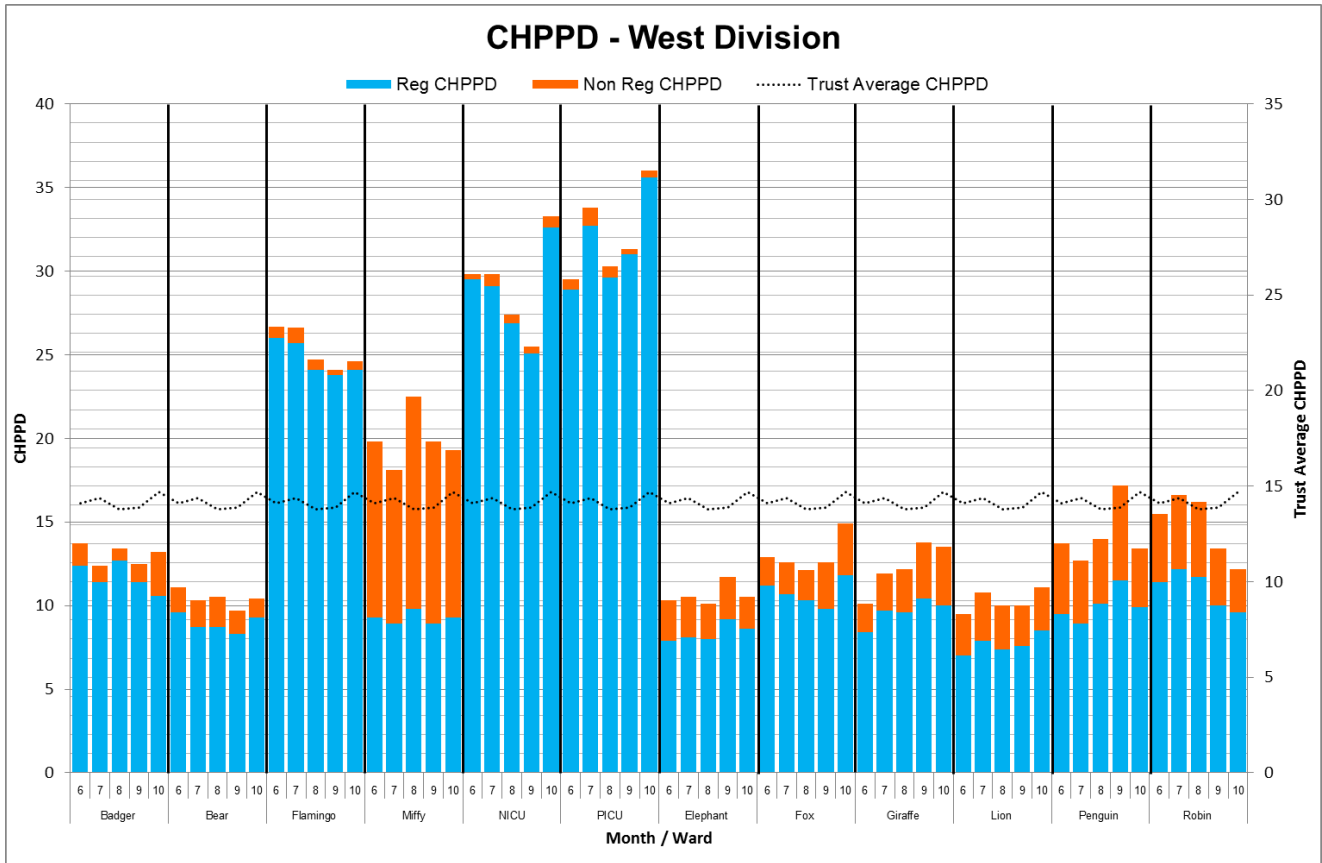
Appendix 3: Overview of Ward Nurse Staffing –

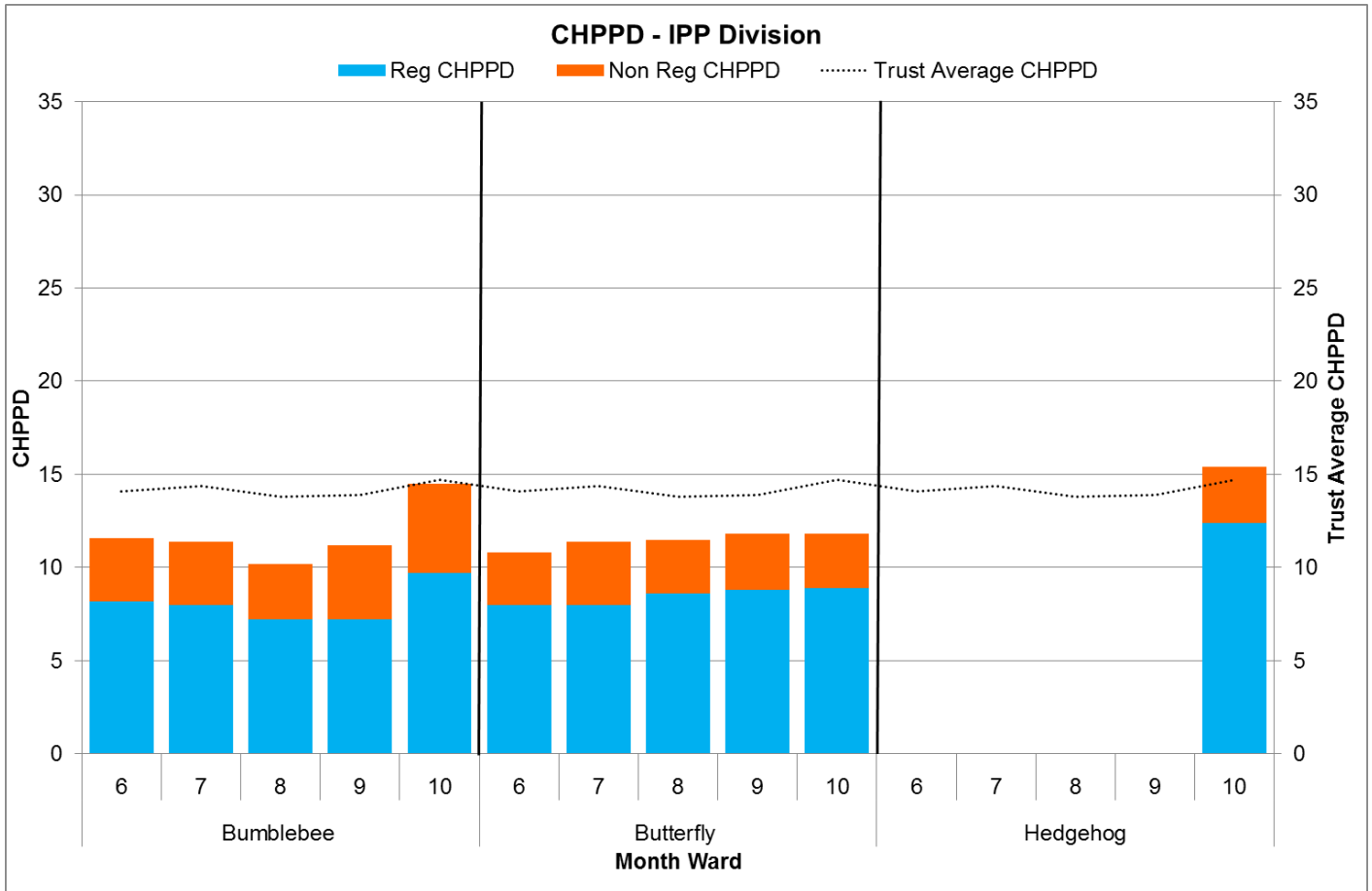
| Division | Ward | Registered Nursing staff | | | | Non Registered | | | | Recruitment Pipeline | | | | | | |
|----------|---------------------|--------------------------|-------------------------------|---------------|-----------|-------------------------------|---------------|-----------|---------------------|----------------------|-----------|------------|---------------------|-------------------------|-------------------------|----------------------|
| | | Established Bed Numbers | Proposed Funded Establishment | Staff in Post | Vacancies | Proposed Funded establishment | Staff in Post | Vacancies | Total Establishment | Total Vacancies | Bank Used | Net Vacant | Registered Starters | Non-registered Starters | Number of unsafe shifts | Average Bed Closures |
| West | Badger | 15 | 39.5 | 31.5 | 8.0 | 7.5 | 6.0 | 1.5 | 47.0 | 9.5 | 1.0 | 8.5 | 0.0 | 0.0 | 0 | 0.0 |
| | Bear | 24 | 53.5 | 55.8 | -2.3 | 9.0 | 6.0 | 3.0 | 62.5 | 0.7 | 5.6 | -4.9 | 3.0 | | 0 | 0.1 |
| | Miffy (TCU) | 5 | 14.1 | 12.8 | 1.3 | 10.4 | 10.0 | 0.4 | 24.5 | 1.7 | 4.5 | -2.8 | 1.0 | 1.0 | 0 | 0.0 |
| | Flamingo | 17 | 121.0 | 111.0 | 10.0 | 10.8 | 3.0 | 7.8 | 131.8 | 17.8 | 15.9 | 1.9 | 20.0 | | 0 | 0.0 |
| | NICU | 8 | 51.5 | 43.2 | 8.3 | 5.2 | 2.0 | 3.2 | 56.7 | 11.5 | 9.8 | 1.7 | | | 0 | 0.0 |
| | PICU | 13 | 83.1 | 99.4 | -16.3 | 8.9 | 1.0 | 7.9 | 92.0 | -8.4 | 11.4 | -19.8 | | | 0 | 0.2 |
| | Elephant | 13 | 25.0 | 21.5 | 3.5 | 5.0 | 3.5 | 1.5 | 30.0 | 5.0 | 4.1 | 0.9 | | | 0 | 0.0 |
| | Fox | 10 | 31.0 | 22.0 | 9.0 | 5.0 | 5.0 | 0.0 | 36.0 | 9.0 | 2.9 | 6.1 | 7.0 | | 0 | 1.8 |
| | Giraffe | 7 | 19.0 | 19.0 | 0.0 | 3.1 | 2.0 | 1.1 | 22.1 | 1.1 | 3.0 | -1.9 | | | 0 | 0.0 |
| | Lion | 11 | 22.0 | 20.7 | 1.3 | 4.0 | 3.0 | 1.0 | 26.0 | 2.3 | 5.0 | -2.7 | 1.0 | | 0 | 0.0 |
| | Penguin | 9 | 15.5 | 13.0 | 2.5 | 5.8 | 6.0 | -0.2 | 21.3 | 2.3 | 3.5 | -1.2 | | | 0 | 0.1 |
| | Robin | 10 | 27.2 | 23.6 | 3.6 | 4.5 | 5.2 | -0.7 | 31.7 | 2.9 | 4.5 | -1.6 | | | 0 | 2.1 |
| IPP | Bumblebee | 21 | 38.3 | 21.0 | 17.3 | 9.7 | 8.0 | 1.7 | 48.0 | 19.0 | 11.8 | 7.2 | | | 0 | 1.9 |
| | Butterfly | 18 | 37.2 | 23.6 | 13.6 | 10.5 | 9.0 | 1.5 | 47.7 | 15.1 | 5.3 | 9.8 | | | 0 | 2.3 |
| | Hedgehog | 10 | 20.0 | 17.6 | 2.4 | 6.0 | 6.0 | 0.0 | 26.0 | 2.4 | 1.3 | 1.1 | | | 0 | 2.0 |
| Barrie | Eagle | 21 | 39.5 | 36.5 | 3.0 | 10.5 | 11.0 | -0.5 | 50.0 | 2.5 | 2.7 | -0.2 | | | 0 | 0.0 |
| | Kingfisher | 16 | 17.1 | 17.2 | -0.1 | 6.2 | 4.8 | 1.4 | 23.3 | 1.3 | 3.4 | -2.1 | | | 0 | 0.0 |
| | Rainforest Gastro | 8 | 17.0 | 15.9 | 1.1 | 4.0 | 3.5 | 0.5 | 21.0 | 1.6 | 1.8 | -0.2 | | | 0 | 0.0 |
| | Rainforest Endo/Met | 8 | 15.6 | 13.6 | 2.0 | 5.2 | 4.5 | 0.7 | 20.8 | 2.7 | 1.7 | 1.0 | | | 0 | 0.0 |
| | Mildred Creak | 10 | 11.8 | 15.1 | -3.3 | 7.8 | 7.6 | 0.2 | 19.6 | -3.1 | 1.0 | -4.1 | | | 0 | 0.0 |
| | Koala | 24 | 48.2 | 44.4 | 3.8 | 7.8 | 4.0 | 3.8 | 56.0 | 7.6 | 5.8 | 1.8 | | | 0 | 0.5 |
| | Peter Pan | 16 | 24.5 | 21.0 | 3.5 | 5.0 | 4.8 | 0.2 | 29.5 | 3.7 | 2.0 | 1.7 | | | 0 | 0.4 |
| | Sky | 18 | 31.0 | 21.2 | 9.8 | 5.2 | 5.2 | 0.0 | 36.2 | 9.8 | 3.0 | 6.8 | | | 0 | 2.1 |
| | Squirrel | 22 | 43.6 | 46.0 | -2.4 | 7.0 | 6.6 | 0.4 | 50.6 | -2.0 | 4.9 | -6.9 | | | 0 | 0.4 |
| | | 334 | 846.2 | 766.6 | 79.6 | 164.1 | 127.7 | 36.4 | 1010.3 | 116.0 | 115.9 | 0.1 | 32.0 | 1.0 | 0.0 | 13.9 |

Appendix 4: Overview of Ward Nurse Staffing – October

| Division | Ward | Registered Nursing staff | | | | Non Registered | | | | Recruitment Pipeline | | | | Number of unsafe shifts | Average Bed Closures | |
|----------|---------------------|--------------------------|-------------------------------|---------------|-----------|-------------------------------|---------------|-----------|---------------------|----------------------|-----------|------------|---------------------|-------------------------|----------------------|-------------------------|
| | | Established Bed Numbers | Proposed Funded Establishment | Staff in Post | Vacancies | Proposed Funded establishment | Staff in Post | Vacancies | Total Establishment | Total Vacancies | Bank Used | Net Vacant | Registered Starters | | | Non-registered Starters |
| West | Badger | 15 | 39.5 | 31.5 | 8.0 | 7.5 | 6.0 | 1.5 | 47.0 | 9.5 | 5.4 | 4.1 | 1.0 | | 0 | 1.1 |
| | Bear | 24 | 53.5 | 55.8 | -2.3 | 9.0 | 6.0 | 3.0 | 62.5 | 0.7 | 7.8 | -7.1 | 5.0 | 1.0 | 0 | 0.1 |
| | Miffy (TCU) | 5 | 14.1 | 12.8 | 1.3 | 10.4 | 10.0 | 0.4 | 24.5 | 1.7 | 3.5 | -1.8 | 1.0 | 1.0 | 0 | 0.0 |
| | Flamingo | 17 | 121.0 | 111.0 | 10.0 | 10.8 | 3.0 | 7.8 | 131.8 | 17.8 | 18.4 | -0.6 | 20.0 | | 0 | 0.0 |
| | NICU | 8 | 51.5 | 43.2 | 8.3 | 5.2 | 1.0 | 4.2 | 56.7 | 12.5 | 8.6 | 3.9 | | | 0 | 0.1 |
| | PICU | 13 | 83.1 | 97.2 | -14.1 | 8.9 | 1.0 | 7.9 | 92.0 | -6.2 | 13.1 | -19.3 | | | 0 | 0.4 |
| | Elephant | 13 | 25.0 | 27.6 | -2.6 | 5.0 | 3.6 | 1.4 | 30.0 | -1.2 | 4.0 | -5.2 | | 3.0 | 0 | 0.0 |
| | Fox | 10 | 31.0 | 26.9 | 4.1 | 5.0 | 4.5 | 0.5 | 36.0 | 4.6 | 3.3 | 1.3 | 7.0 | 1.0 | 0 | 1.3 |
| | Giraffe | 7 | 19.0 | 19.9 | -0.9 | 3.1 | 4.0 | -0.9 | 22.1 | -1.8 | 2.6 | -4.4 | | | 0 | 0.0 |
| | Lion | 11 | 22.0 | 22.7 | -0.7 | 4.0 | 3.0 | 1.0 | 26.0 | 0.3 | 5.5 | -5.2 | 1.0 | 1.0 | 0 | 0.0 |
| | Penguin | 9 | 15.5 | 17.0 | -1.5 | 5.8 | 6.0 | -0.2 | 21.3 | -1.7 | 2.2 | -3.9 | | | 0 | 0.0 |
| | Robin | 10 | 27.2 | 25.7 | 1.5 | 4.5 | 5.2 | -0.7 | 31.7 | 0.8 | 3.7 | -2.9 | 2.0 | | 0 | 2.0 |
| IPP | Bumblebee | 21 | 38.3 | 26.0 | 12.3 | 9.7 | 8.0 | 1.7 | 48.0 | 14.0 | 13.3 | 0.7 | | 3.0 | 0 | 3.3 |
| | Butterfly | 18 | 37.2 | 27.0 | 10.2 | 10.5 | 8.0 | 2.5 | 47.7 | 12.7 | 3.1 | 9.6 | | 2.0 | 0 | 2.0 |
| | Hedgehog | 10 | 20.0 | 18.6 | 1.4 | 6.0 | 6.0 | 0.0 | 26.0 | 1.4 | 1.8 | -0.4 | | | 0 | 2.0 |
| Barrie | Eagle | 21 | 39.5 | 32.5 | 7.0 | 10.5 | 9.0 | 1.5 | 50.0 | 8.5 | 2.7 | 5.9 | | | 0 | 0.1 |
| | Kingfisher | 16 | 17.1 | 17.2 | -0.1 | 6.2 | 4.9 | 1.3 | 23.3 | 1.2 | 2.5 | -1.3 | | 1.0 | 0 | 0.0 |
| | Rainforest Gastro | 8 | 17.0 | 14.2 | 2.8 | 4.0 | 3.5 | 0.5 | 21.0 | 3.3 | 1.4 | 1.9 | | 1.0 | 0 | 0.0 |
| | Rainforest Endo/Met | 8 | 15.6 | 15.0 | 0.6 | 5.2 | 5.5 | -0.3 | 20.8 | 0.3 | 2.4 | -2.1 | | | 0 | 0.1 |
| | Mildred Creak | 10 | 11.8 | 12.2 | -0.4 | 7.8 | 6.6 | 1.2 | 19.6 | 0.8 | 1.1 | -0.3 | | | 0 | 0.0 |
| | Koala | 24 | 48.2 | 47.4 | 0.8 | 7.8 | 5.0 | 2.8 | 56.0 | 3.6 | 6.2 | -2.6 | | 3.0 | 0 | 3.8 |
| | Peter Pan | 16 | 24.5 | 28.0 | -3.5 | 5.0 | 3.0 | 2.0 | 29.5 | -1.5 | 2.3 | -3.8 | | 1.0 | 0 | 0.1 |
| | Sky | 18 | 31.0 | 27.7 | 3.3 | 5.2 | 4.0 | 1.2 | 36.2 | 4.5 | 2.7 | 1.8 | | | 0 | 2.0 |
| | Squirrel | 22 | 43.6 | 43.0 | 0.6 | 7.0 | 8.0 | -1.0 | 50.6 | -0.4 | 4.4 | -4.8 | | | 0 | 0.4 |
| | | 334 | 846.2 | 800.1 | 46.1 | 164.1 | 124.8 | 39.3 | 1010.3 | 85.4 | 122.0 | -36.6 | 37.0 | 18.0 | 0.0 | 18.8 |

Appendix 5: Care Hours per Patient Day (CHPPD)






Appendix 6: Recruitment Workstream

Nursing Workforce Programme – Recruitment Workstream October 2016

| Executive summary | | | Accountable |
|---|--|--|---|
| <p>The Trust wants to create a reliable, continuous supply of high quality nurses to provide safe and high quality care for our patients. The Trust is planning to commission additional beds to deliver on service requirements, across a number of specialities, subject to commissioner support. The opening of the new Premier Inn Clinical Building in August 2017 will require additional nurses and additional workforces. In the absence of an agreed increased nursing workforce the Trust will not deliver on its 18 week patient pathways or the expected and required expansion for particular clinical services. Our objectives are to implement culture change within nursing and operational services to ensure the right nurses are recruited in to the right roles, at the right time.</p> | | | <p>Juliette Greenwood Ali Mohammed</p> |
| | | | Responsible |
| | | | <p>Polly Hodgson Ellen Mossman</p> |
| Status | Achievements over past quarter | Actions planned for next month | |
| ORANGE | <ul style="list-style-type: none"> Recruited: 145 newly qualified nurses, 39 Healthcare Assistants/Healthcare Support Workers and 30 experienced nurses Centralised shortlisting process and piloted re-design of adverts 206 attended GOSH open day on 13th October Attended 7 national and local recruitment events Engaged charity in launch of new recruitment campaign Lead Nurse for Recruitment has joined the team | <p>Actions slipped or delayed:</p> <ul style="list-style-type: none"> Reporting and governance for programme board <p>New actions:</p> <ul style="list-style-type: none"> Confirm governance structure, nursing workforce KPIs and reporting schedule including weekly reporting of vacancies, leavers and staff in pipeline Launch of new streamlined recruitment process and team | |
| Top immediate risks/issues | | Mitigation actions | Risk/Issue owner |
| Increased demand due to RTT | | Working with Nursing Bank and strategic allocation of NQNs | Divisional Head of Nursing |
| On-boarding large number of newly qualified nurses | | Larger Practice Education team | Ward Sisters/Managers |
| Upcoming milestones (next quarter) | | | Oversight by |
| <ul style="list-style-type: none"> Launch a revised talent attraction methodology and design advertising campaign Confirm strategy for international recruitment and develop relationships with chosen agencies Review assessment of assessment centres and return on investment review of job fairs Confirm desired workforce profile and projected nursing workforce numbers Develop a nursing community for current and future GOSH nurses Work with charity to focus on attracting student nurses | | | <ul style="list-style-type: none"> November 2016 December 2016 January 2017 January 2017 February 2017 |



Appendix 7: Retention Workstream

| Nursing Workforce Programme – Retention Workstream | | | Great Ormond Street  Hospital for Children NHS Foundation Trust | |
|---|--|---|--|--|
| Executive summary | | | Accountable | |
| Despite significant, continuously focused recruitment activity, there remains a shortfall in the numbers of nurses applying for and being employed at GOSH, which has impacted on service provision and, most probably and importantly, on the morale of the current nursing workforce. This has been made more acute by a high turnover rate for nurses (registered and unregistered workforce). The most common reasons nurses leave GOSH are: attitude of ward sister, not feeling valued or part of the team and lack of access to further education and on-going development. We need to develop & enable ward / department nursing leadership and become a 'nurse friendly' organisation with meaningful measurement. | | | Juliette Greenwood Ali Mohammed | |
| | | | Responsible | |
| | | | Polly Hodgson Ellen Mossman | |
| Status | Achievements over past quarter | Actions planned for next month | | |
| ORANGE | <ul style="list-style-type: none"> Re-designed staff exit survey Undertake retention diagnostic work in line with best international evidence Review of accommodation provision Debrief sessions with Newly Qualified Nurses Compilation of GOSH Workforce rules for review | Actions slipped or delayed: <ul style="list-style-type: none"> Reporting and governance for programme board New actions: <ul style="list-style-type: none"> Refine on-boarding and induction processes for nurses Produce retention plan Review of GOSH workforce rules Internal engagement and communication plan | | |
| Top immediate risks/issues | Mitigation actions | Risk/Issue owner | Oversight by | |
| Additional pressure and negative impact on staff morale due to increased vacancy rate. | Training for Ward Sisters and Matrons and staff events being planned. | Polly Hodgson | Juliette Greenwood | |
| Finding and organising accommodation for new recruits | Review in progress | Helen Cooke | Ali Mohammed | |
| Upcoming milestones (next quarter) | | | | |
| <ul style="list-style-type: none"> Redefinition of ward sisters' roles and development programme for Matrons Research reward packages and develop GOSH Nursing Offer Implement retention risk monitoring tools and tracking log Review PDR paperwork to ask about staff wellbeing and career aspirations Review education provision at ward level Implement Capital Nursing careers structure and develop competence framework for adult nurses | | <ul style="list-style-type: none"> January 2017 December 2016 December 2016 December 2016 January 2017 January 2016 | | |

