Trust Board July 22nd 2015	
Safe Nurse Staffing Report	**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 and nurse recruitment.

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

May 2015

1. Introduction

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

2. Context and Background

2.1 The expectation is the Board 'take full responsibility for the care provided to patients and, as a key determinant of quality, take full and collective responsibility for nursing care capacity and capability'.

2.2 Monthly nurse staffing updates are submitted to NHS England and the Trust Board with the following information:

1. The number of staff on duty the previous month compared to planned staffing levels.

2. The reasons for any gaps, highlighting those wards where this is a consistent feature and impacts on the quality of care, to include actions being taken to address issues.

3. The impact on key quality and safety measures.

3. GOSH Ward Nurse Staffing Information for Trust Board

3.1 Safe Staffing

3.1.1 The UNIFY Fill Rate Indicator for May is attached as Appendix 1. The spread sheet contains:

- Total monthly planned staff hours; the Heads of Nursing provide this figure based on the agreed average safe staffing level for each of their wards. These figures are fixed i.e. do not alter month on month. Bed closure information is used to adjust the planned staffing levels. 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, extra staff booked to cope with changes in patient dependency and acuity from the Nurse Bank. This may both exceed or be below 100% to meet the changing occupancy and activity levels as well as the patient dependency and acuity.

- Average fill rate of planned shifts. It must be noted that the presentation of data in this way is open to misinterpretation as the non-registered pool is small in comparison to the registered pool, therefore one HCA vacancy or extra shifts worked will have a disproportionate effect on the % level.

- To comply with previous guidance, this and future returns will exclude Registered Nurses and Care Staff that have worked in a supernumerary capacity on wards.

3.1.2 Commentary:

- Heads of Nursing are asked to comment on percentage scores of less than 90% or greater than 110%, and declare any unsafe staffing situations that have occurred during the month in question including actions taken at the time to rectify and make the situation safe.

- The overall Trust fill rate % for May is:

RN Day	RN Night	HCA Day	HCA Night	Total Fill Rate
106.8%	92.2%	96.3%	76%	99.3%

ICI – No unsafe shifts reported in May
Both Robin Ward and Fox Ward report high levels of sickness and several vacant posts. Several patients have been unable to commence treatment due to their clinical condition, this has resulted in some shifts with lower dependency and acuity, and significantly reduced staffing requirements. Penguin Ward, HCA requirement on night reduced due to patient numbers. The high percentage of HCAs on day relates to nurses awaiting registration (rostered on HCA grades). ICI staff are moved across wards to meet the needs of the patient population.
Surgery No unsafe shifts reported in May
Peter Pan Ward was closed for a prolonged period for deep cleaning hence the low number of filled hours.
CCCR – No unsafe shifts reported in May
Badger report having increased numbers of Ward Intensive Care patients requiring 1:1 care. MIFFY have an extra nurse on days undergoing training. Two funded extra beds remain closed on Badger Ward whilst staff are recruited. HCA numbers have increased and are being trained for their new posts hence the high numbers on days. Flamingo planned staffing for 17 beds, up to 3 additional beds (total 20) are opened when staff available through the Nurse Bank. Three ECMO cases requiring 2:1 care. High HCA numbers account for Nurses awaiting NMC registration NICU have increased sickness requiring extra staff on shifts whilst inducting new staff to the unit.
MDTS - No unsafe shifts reported in May
Eagle Ward has 2 HCAs absent (20% of total), Rainforest Endocrine/Metabolic has a vacant HCA position registered nurse hours were increased to fill this gap. Rainforest Gastro has closed two beds due to long term sickness and vacancies.
Neurosciences - No unsafe shifts reported in May
Koala has reported high levels of acuity requiring extra staff, beds have been closed at times to accommodate the high patient acuity. Higher number of HCA hours on day shifts is due to staff training, once competent, staff will move to nights to equalise numbers. Mildred Creak Unit –increased registered hours for several children requiring 1:1 special, in addition to the overlap between the acting Ward Sister and the current postholder.
IPP - No unsafe shifts reported in May
Bumblebee - increase in HCAs on days to care for several vulnerable neonates requiring supervised care. A number of patients on overnight leave hence reduced night hours. Butterfly has seen a variance in activity resulting in fewer registered staff both day and night shift. Staff worked flexibly across the wards as needed.

3.1.4 The Clinical Site Practitioners (CSPs) report that no wards were declared unsafe during May, however there were 5 occasions in May where staff were moved between wards for part or a whole shift to maintain safe care. A further 8 occasions are noted where wards reported a shift being short of staff, however patient safety was not compromised.

3.2 General Staffing Information

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

3.2.2 18 out of 23 inpatient wards closed beds at various points during May. An average of 12 beds were closed each day, this has reduced from 17 in April. A number of these closures were for both urgent and routine maintenance work. Badger Ward continues to have 2 beds closed whilst staff are recruited and trained, Koala closed up to 4 beds due to increased patient acuity and dependency. Rainforest Gastro has a number of vacancies plus nurses on maternity leave, this has resulted in 2 closed beds whilst these vacancies are filled. Other areas had beds closed at times due to acute staff sickness and fluctuations in dependency and acuity.

3.2.3 For the inpatient wards, registered and non-registered vacancies for May are 109 (11%) and increase of 9 Whole Time Equivalents (WTE) from April, this breaks down to 83 (73 in April) registered nurse (RN) vacancies (10% of RN total). HCA vacancies number 26 (27 in April) non registered vacancies (16% of HCA total). Temporary nurses, mainly from GOSH Nurse Bank, employed on wards totalled 100 WTE, the May position was therefore 9.4 WTE vacant posts slightly down from 11.2 WTE reported in April 2015.

3.2.4 New starters progressing through pre-employment checks total 26 registered nurses and 6 HCAs. There has been delays in obtaining clearance for a number of HCAs from the April Assessment Centre (candidates delay in providing information). HCA recruitment to the ICUs is on currently on hold pending further work on the education pathway. We continue to recruit HCAs to the wards to achieve the target, however high numbers fail to attend the assessment centre or do not meet the requirements of the assessment centre, to compensate we have increased the numbers of candidates invited for the day.

3.2.5 The recent Newly Qualified advertisement received 195 applications, 179 were shortlisted, 139 attended. Candidates participated in 4 assessments, a good standard of numeracy skills is essential, 28 candidates did not meet this standard. 111 candidates have gone through for consideration by wards for employment.

3.2.6 Twelve nurses exiting the Trust General Rotation Programme have secured GOSH employment (100% retention).

3.2.7 The Trust will be represented at the Birmingham RCN jobs Fair in July.

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

3.2.9 The 6 monthly nurse establishment reviews were completed in June 2015, The Board of Directors will receive the report in July.

4 **Key Challenges**

- Recruitment of HCAs in the Critical Care areas.

- Recruitment of Band 6 Nurses.

- Retention of Band 5 and 6 Nurses.

5. **Key Quality and Safety Measures and Information**

5.1 Hard Truths Commitments Regarding the Publishing of Staffing Data (Care Quality Commission, March 2014) states 'data alone cannot assure anyone that safe care is being delivered. However research demonstrates that staffing levels are linked to the safety of care and that fewer staff increases the risks of patient safety incidents occurring.' In order to assure the Board of safe staffing on wards the following nursing quality and patient

experience information has been collated to demonstrate that the wards were safe during May 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	1	Reported as HAI
MRSA Bacteraemias	0	
MSSA Bacteraemias	1	
E Coli Bacteraemia	1	
D & V and other outbreaks	2	1 cluster of parainfluenza – no beds close 4 chicken pox exposures
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 comprehensive chlorine clean.

5.4 **Pressure ulcers**

	Number	Ward
Grade 3	**1**	Discovered on admission to GOSH
Grade 2	**6**	2 Bumblebee, 3 PICU, 1 Flamingo - all considered avoidable

5.5 **Deteriorating patient**

5.5.1 For the month of May, 6 patient related emergency calls were received of which 2 were cardiac arrests (Flamingo and VCB theatres) there was 1 respiratory arrest (interventional radiology). In addition 8 patients had unplanned admissions to Intensive Care (2 Rainforest Endocrine/Metabolic, 1 Elephant, 2 Squirrel, and 3 from Fox Ward.

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

Koala Ward - patient underwent procedure that would require 1:1 nursing care in a cubicle, due to staffing levels the patient was nursed in the High Dependency Bay which may have affected the clinical information from telemetry monitoring.

Badger Ward – poor communication regarding a child with a tracheostomy and the level of care that would be required post anaesthetic, there were 3 tracheostomy patients requiring 1:1 care, this patient was the 4th, putting a strain on nursing resources. Additional staff were allocated to Badger.

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

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

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

- Response rate for May was 31.76%, the target has increased from 25% to 40% by the end of Quarter 2 and up to 60% by the end of Quarter 4.
- The FFT score remains at 82 for May.
- Families that were extremely likely to recommend their friends and family was 82.6% (246) with 14.1% (42) likely to recommend, similar to April results.
- 3 Families provided information praising staff on Elephant Ward, Peter Pan Ward and Squirrel Ward. 1 negative response was received relating to communication on Kingfisher.

6.   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 May, and appropriate actions were taken when concerns were raised. All Trusts are required to ensure the validity of data by triangulating information from different sources prior to providing assurance reports to their Board of Directors, this has been key to compiling the report.

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

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

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

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

7.4   The success of recent advertising and recruitment.

Appendix 1: UNIFY Safe Staffing Submission – May 2015

Staffing: Nursing, midwifery and care staff

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

Period: May_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

Validation alerts (see control panel)	Site code	Hospital Site name	Ward name	Specialty 1	Specialty 2	Day — Registered midwives/nurses Total monthly planned staff hours	Day — Registered midwives/nurses Total monthly actual staff hours	Day — Care Staff Total monthly planned staff hours	Day — Care Staff Total monthly actual staff hours	Night — Registered midwives/nurses Total monthly planned staff hours	Night — Registered midwives/nurses Total monthly actual staff hours	Night — Care Staff Total monthly planned staff hours	Night — Care Staff Total monthly actual staff hours	Average fill rate - registered nurses/midwives (%) Day	Average fill rate - care staff (%) Day	Average fill rate - registered nurses/midwives (%) Night	Average fill rate - care staff (%) Night
	RP401	Great Ormond Street Hospital Central London Site -	Badger Ward	340 - RESPIRATORY MEDICINE		2025	2428.85	303	460	1820	2078.2	303	216.7	119.9%	151.8%	114.2%	71.5%
	RP401	Great Ormond Street Hospital Central London Site -	Bear Ward	170 - CARDIOTHORACIC SURGERY	321 - PAEDIATRIC CARDIOLOGY	2848	3246.25	597	548.75	2848	2886.4	356	320.95	114.0%	91.9%	101.3%	90.2%
	RP401	Great Ormond Street Hospital Central London Site -	Flamingo Ward	192 - CRITICAL CARE MEDICINE		5589	7150.8	356	437	5347	6246.9	184	270.7	127.9%	122.8%	116.8%	147.1%
	RP401	Great Ormond Street Hospital Central London Site -	Miffy Ward (TCU)	340 - RESPIRATORY MEDICINE		709	1002.9	1063	733.75	709	664.4	709	600.7	141.5%	69.0%	93.7%	84.7%
	RP401	Great Ormond Street Hospital Central London Site -	Neonatal Intensive Care Unit	192 - CRITICAL CARE MEDICINE		2823	3642		207	2470	3207.2		43.2	129.0%		129.8%	
	RP401	Great Ormond Street Hospital Central London Site -	Paediatric Intensive Care Unit	192 - CRITICAL CARE MEDICINE		6035	6646.4	355	454.75	6035	5515.97	355	216	110.1%	128.1%	91.4%	60.8%
	RP401	Great Ormond Street Hospital Central London Site -	Elephant Ward	370 - MEDICAL ONCOLOGY	823 - HAEMATOLOGY	1664	1730.5	355	347.5	1423	1345.5	355	302.4	104.0%	97.9%	94.6%	85.2%
	RP401	Great Ormond Street Hospital Central London Site -	Fox Ward	303 - CLINICAL HAEMATOLOGY	313 - CLINICAL IMMUNOLOGY and ALLERGY	2023	1345.25	303	229.15	1671	1194.7	303	290.9	66.5%	75.6%	71.5%	96.0%
	RP401	Great Ormond Street Hospital Central London Site -	Giraffe Ward	313 - CLINICAL IMMUNOLOGY and ALLERGY	350 - INFECTIOUS DISEASES	1061	1079	353	282	1061	752.9	353	291.3	101.7%	79.9%	71.0%	82.5%
	RP401	Great Ormond Street Hospital Central London Site -	Lion Ward	370 - MEDICAL ONCOLOGY	303 - CLINICAL HAEMATOLOGY	1643	1593.85	351	264.5	1405	1241.7	351	233.75	97.0%	75.4%	88.4%	66.6%
	RP401	Great Ormond Street Hospital Central London Site -	Penguin Ward	330 - DERMATOLOGY	410 - RHEUMATOLOGY	934	1069.66	349	617	698	674.9	349	123	114.5%	176.8%	96.7%	35.2%
	RP401	Great Ormond Street Hospital Central London Site -	Robin Ward	350 - INFECTIOUS DISEASES	313 - CLINICAL IMMUNOLOGY and ALLERGY	1981	1486.75	348	251.5	1744	1362.45	348	290.9	75.1%	72.3%	78.1%	83.6%
	RP401	Great Ormond Street Hospital Central London Site -	Bumblebee Ward	171 - PAEDIATRIC SURGERY	420 - PAEDIATRICS	2345	2387.65	335	644	2010	1911.65	670	404.5	101.8%	192.2%	95.1%	60.4%
	RP401	Great Ormond Street Hospital Central London Site -	Butterfly Ward	370 - MEDICAL ONCOLOGY	420 - PAEDIATRICS	2585	2302.5	323	503.5	1939	1355.3	323	262	89.1%	155.9%	69.9%	81.1%
	RP401	Great Ormond Street Hospital Central London Site -	Eagle Ward	361 - NEPHROLOGY		2248	2181.25	707	609	1415	1518.1	353	259.2	97.0%	86.1%	107.3%	73.4%
	RP401	Great Ormond Street Hospital Central London Site -	Kingfisher Ward	420 - PAEDIATRICS		1733	1841.1	895	642	293	303.1		21.6	106.2%	71.7%	103.4%	
	RP401	Great Ormond Street Hospital Central London Site -	Rainforest Ward (Gastro)	301 - GASTROENTEROLOGY		825	997.15	616	368	616	666.2	616	295.1	120.9%	59.7%	108.1%	47.9%
	RP401	Great Ormond Street Hospital Central London Site -	Rainforest Ward (Endo/Met)	302 - ENDOCRINOLOGY		1058	1221.95	705	172	1058	767.5	352	305.9	115.5%	24.4%	72.5%	86.9%
	RP401	Great Ormond Street Hospital Central London Site -	Mildred Creak	711- CHILD and ADOLESCENT PSYCHIATRY		1094	1495.75	586	431	500	442.8	443	464.4	136.7%	73.5%	88.6%	104.8%
	RP401	Great Ormond Street Hospital Central London Site -	Koala Ward	150 - NEUROSURGERY	421 - PAEDIATRIC NEUROLOGY	3038	3281.5	324	414.3	2934	2891.32	324	129.6	108.0%	127.9%	98.5%	40.0%
	RP401	Great Ormond Street Hospital Central London Site -	Peter Pan Ward	120 - ENT	160 - PLASTIC SURGERY	1537	842	592	207	1423	729.2			54.8%	35.0%	51.2%	
	RP401	Great Ormond Street Hospital Central London Site -	Sky Ward	110 - TRAUMA & ORTHOPAEDICS	171 - PAEDIATRIC SURGERY	1926	2030.3	678	796.5	1871	1882.1			105.4%	117.5%	100.6%	
	RP401	Great Ormond Street Hospital Central London Site -	Squirrel Ward	171 - PAEDIATRIC SURGERY	101 - UROLOGY	2939	3081.56	703	708	2644	2679.6		11.5	104.9%	100.7%	101.3%	

Appendix 2: Overview of Ward Nurse Staffing – May 2015

Division	Ward	Established Bed Numbers	Registered Nursing staff			Non Registered			Total Estabslishment	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	31.0	8.5	7.5	5.0	2.5	47.0	11.0	3.3	7.8	2.0	2	0	2.2
	Bear	22	47.8	41.0	6.8	9.0	6.0	3.0	56.8	9.8	7.7	2.1	0.0	2	0	0.0
	Flamingo	17	121.0	104.0	17.0	10.8	7.0	3.8	131.8	20.8	16.3	4.5	0.0	0	0	0.0
	Miffy (TCU)	5	14.1	12.6	1.5	7.8	6.0	1.8	21.9	3.3	4.7	-1.4	0.0	1	0	0.0
	NICU	8	51.5	41.0	10.5	5.2	1.0	4.2	56.7	14.7	12.0	2.7	3.0	0	0	0.1
	PICU	13	83.0	94.7	-11.7	8.9	5.0	3.9	91.9	-7.8	9.4	-17.2	7.0	0	0	0.1
ICI-LM	Elephant	13	25.0	25.0	0.0	4.9	4.9	0.0	29.9	0.0	1.8	-1.8	2.0		0	0.0
	Fox	10	31.0	24.0	7.0	5.2	5.0	0.2	36.2	7.2	3.4	3.8	2.0		0	1.5
	Giraffe	7	19.0	18.3	0.7	3.1	3.5	-0.4	22.1	0.3	2.4	-2.1			0	0.1
	Lion	11	22.0	22.0	0.0	4.0	4.0	0.0	26.0	0.0	2.6	-2.6			0	0.2
	Penguin	9	15.5	15.5	0.0	5.5	5.5	0.0	21.0	0.0	2.8	-2.8	1.0		0	0.2
	Robin	10	27.2	23.8	3.4	4.5	4.4	0.1	31.7	3.5	4.4	-0.9	1.0		0	0.2
IPP	Bumblebee	21	38.3	28.7	9.6	9.7	9.0	0.7	48.0	10.3	5.3	5.0	6.0	1	0	1.3
	Butterfly	18	37.2	27.0	10.2	10.5	9.0	1.5	47.7	11.7	2.5	9.2	1.6		0	1.7
MDTS	Eagle	21	39.5	34.6	4.9	10.5	10.0	0.5	50.0	5.4	1.1	4.3			0	0.1
	Kingfisher	16	17.1	16.8	0.3	6.2	4.8	1.4	23.3	1.7	0.7	1.0			0	0.0
	Rainforest Gastro	8	17.0	11.0	6.0	4.0	4.0	0.0	21.0	6.0	3.5	2.5			0	1.1
	Rainforest Endo/Met	8	15.6	17.1	-1.5	5.2	5.0	0.2	20.8	-1.3	2.1	-3.4			0	0.1
Neuro-sciences	Mildred Creak	10	11.8	15.2	-3.4	7.8	7.6	0.2	19.6	-3.2	0.2	-3.4			0	0.1
	Koala	24	48.2	44.8	3.4	7.8	5.5	2.3	56.0	5.7	4.4	1.3				2.1
Surgery	Peter Pan	16	24.5	21.3	3.2	5.0	5.0	0.0	29.5	3.2	0.6	2.6			0	0.2
	Sky	18	31.0	27.4	3.6	5.2	6.0	-0.8	36.2	2.8	3.2	-0.3			0	0.9
	Squirrel	22	43.6	40.6	3.0	7.0	6.0	1.0	50.6	4.0	5.6	-1.6			0	0.3
	TRUST TOTAL:	322	820.4	737.4	83.0	155.3	129.2	26.1	975.7	109.1	99.7	9.4	25.6	6.0	0.0	12.5