

	Board uary 2016
Safe Nurse Staffing Report for November 2015	Paper No
Submitted by: Juliette Greenwood Chief Nurse	
across all in- patient ward areas and approdument for nursing staff. In order to provincludes appropriate nurse quality measure	de greater transparency the report also es and details of ward safe staffing reports. rsing vacancies, nurse recruitment and this
Action required from the meeting The Board is asked to note:	
 The content of the report and be as provided to meet the national and leading 	ssured that appropriate information is being ocal requirements.
The information on safe staffing an	d the impact on quality of care.
To note the key challenges around	recruitment and the actions being taken.
Contribution to the delivery of NHS Four Safe levels of nurse staffing are essential to perience.	<u> </u>
Compliance with How to ensure the right pplace at the right time – A guide to nursing ity' (NHS England, Nov 2013) and the 'Hair Publishing of Staffing Data' issued by the Complex of the	n, midwifery and care staffing and capabil- rd Truths Commitments Regarding the
Financial implications Already incorporated into 15/16 Division by	udgets
Who needs to be told about any decision Divisional Management Teams Finance Department	
Who is responsible for implementing the timescales? Chief Nurse; Assistant Chief Nurse, Heads	
Who is accountable for the implementa Chief Nurse; Divisional Management Tean	

GOSH NURSE SAFE STAFFING REPORT

November 2015

1. Introduction

- 1.1 This report on GOSH Safe Nurse Staffing contains information from the month of November 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 November 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 November is:

RN Day	RN Night	HCA Day	HCA Night	Total Fill Rate		
103%	91%	90%	70%	95%		

ICI – No unsafe shifts reported in November

Fox and Robin Ward had one bed closed on each ward for November. To meet patient/staffing requirements HCAs were moved from night shifts to day shifts hence some low percentages on nights on all wards. Elsewhere in the division there were varying levels of dependency between days and nights requiring staff to be moved between shifts and Wards across the Division to maintain safe staffing levels.

Surgery No unsafe shifts reported in November

Sky Ward increased HCA hours on days due to patient acuity, HCAs were moved from day shifts to nights shifts on Peter Pan and Squirrel to meet patient dependency.

CCCR - No unsafe shifts reported in November

Badger Ward reported a shift of particular concern where short notice sickness led to the ward being short staffed but not unsafe. Vacant HCA posts contributed to low fill rates on Badger, PICU and NICU.

The Lead Nurse on Flamingo Ward reported 3 shifts where staffing was an issue and a case was cancelled. There are a total of 23 vacancies at Band 5 and 6. A number of new starters and HCAs have been appointed however concerns have been raised by the ward regarding the level of supervision required by new starters to the area.

MDTS - No unsafe shifts reported in November

Eagle Ward report increased levels of Haemodialysis treatments requiring increased registered nurses on day shifts. To meet increasing pressure on beds across the Trust, Kingfisher Ward has experienced increased activity and overnight stays requiring extra staff. In an attempt to increase haemodialysis staff the Bank rates have been increased.

Rainforest Endocrine/Metabolic have HCA vacancies.

Extra Registered Nurse hours were employed to compensate for deficit in HCA hours.

Neurosciences - No unsafe shifts reported in November

Koala Ward - more HCA hours during day shifts due staff working as Patient Pathway Coordinators.

IPP - No unsafe shifts reported in November

Butterfly and Bumblebee both reported HCA's rostered to provide maximum support during the busier day periods due to theatre cases etc. 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 November, 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 November. 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. 9 out of 23 inpatient wards closed beds at various points during November. An average of 4.5 beds were closed each day. Reasons cited for closures were; staff moved from Eagle Ward to Dialysis Service. Robin and Fox wards closed a bed each due to short term vacancies and skill mix.
- 3.0.3 For the inpatient wards, registered and non-registered vacancies for total 79 Whole Time Equivalents (WTE) a slight increase from 77 in October. This breaks down to 45 (45 in

October) registered nurse (RN) vacancies (5% of RN total). HCA vacancies number 34 (21% of HCA total) similar to the October position. Temporary nurses, mainly from GOSH Nurse Bank, employed on wards totalled 99 WTE, the November position was therefore 19 WTE posts above establishment (38 in October). This is not unusual for this time period, as we have many new starters who are going through orientation, induction and a period of supernumerary practice, during this period Bank staff provide the backup cover. There are 40 RNs and 8 HCAs in the recruitment pipeline undergoing pre-employment checks.

3.1 Vacancies and Recruitment

- 3.1.1 There remains 33 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 in April 2016.
- 3.1.2 In addition to the 40 nurses in the recruitment pipeline an additional 6 nurses have been recruited from Cork.
- 3.1.3 6 Adult Nurses will commence on the new Adult RN Programme with secondment to LSBU following clinical experience to the Child Branch programme.
- 3.1.4 An additional Newly Registered Rotation Programme is planned for March 2016, 12 posts have been ring fenced for this programme.
- 3.1.5 GOSH hosted a Recruitment Fair on 13th November 120 visitors attended. The next Newly Registered Nurses assessment centre is planned for December.
- 3.1.6 The new IPP Ward (Hedgehog) has started recruitment with a planned opening date of April 2016. An open day for staff was held on 18th November.

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 November 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	4	
E Coli Bacteraemia	2	
D & V and other outbreaks	0	
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	1	Identified on admission to Flamingo Ward. Referred back to referring
		hospital for investigation.
Grade 2	6	3 on Squirrel ward, I Bumblebee, 1 PICU, 1 NICU.

- 5.4.1 We treat all pressure ulcers as avoidable at present. The Grade 3 incident was escalated for investigation. Two of the three ulcers reported on Squirrel ward relate to the same patient. A root cause analysis is underway to prevent this from reoccurring within a specific cohort of urology patients.
- 5.4.2 The Tissue Viability Nurse and Practice Educator have assessed the numbers of incidents related to devices and are developing guidance for staff on prevention e.g. for patients with tracheostomies or on non-invasive ventilation. Further work will commence with anaesthetists and nursing staff to reduce endotracheal pressure ulcers.

5.5 **Deteriorating patient**

5.5.1 For the month of November, 20 emergency calls were received, there were no cardiac arrests. There were 10 respiratory arrests, 5 relate to the same patient on Badger ward. There were 4 unplanned admissions to PICU – 1 Badger ward, 1 Rainforest Endocrine/Metabolic, 1 Koala and 1 from Bumblebee.

5.6 Numbers of safety incidents reported about inadequate nurse staffing levels

There were 5 incidents in total reported by staff through Datix regarding staffing levels, these all relate to Flamingo Ward. Three of these reports related to situations where either staff sickness or sudden deterioration of patients affected safe staffing levels, and the appropriate ratios of 1:1 nursing or 2:1 nursing for high dependency patients could not be maintained. 2 incidents related to patients with known grade 2 pressure ulcers who could not be turned 2 hourly in line with the Glamorgan Pressure Ulcer management guidance. In each instance the ward was made safe by obtaining staff from other ITU's or the Clinical Site Practitioners, or expediting the discharge of another patient from the ITU.

5.7 Pals concerns raised by families regarding nurse staffing - 2

Flamingo Ward – parent reported there were insufficient nurses to help her feed her child. The second related to a childs admission being cancelled on Rainforest due to lack of beds.

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 November was 21% (October 17%). The overall target is 40% response rate increasing to 60% at the end of Quarter 4 2015/16.
- The overall percentage to recommend score is 98%.
- For October families that were extremely likely to recommend GOSH to their friends and family equalled 573 (87%), and 68 (10%) likely to recommend, compared with 460 (90%) and 44 (9%) in October.
- Many comments were received regarding the friendliness of staff, confidence in care received and overall quality of care.
- Several comments received regarding waiting for medications and treatment and miscommunication.

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 November, 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.

Appendix 1: UNIFY Safe Staffing Submission – November 2015 Fill rate indicator return

Great Ormond Street Hospital For Children NHS Founda

2015-16		

n Trust	Starring: Nursing, midwirery and care starr
Please provide	the URL to the page on your trust website where your staffing information is available
(Please can you	u ensure that the URL you attach to the spreadsheet is correct and links to the correct web page and include 'http://' in your URL)
http://www.gosh.i	nhs.uk/about-us/our-corporate-information/publications-and-reports/safe-nurse-staffing-report/
Comments	5

Only complete sites your organisation is accountable for						D	ay			Ni	ght		D	ay	Night	
	Hospital Site Details		Main 2 Special	ties on each ward	Registered midwives/nurses		Care Staff		Registered midwives/nurses		Care Staff		Average fill		Average fill	
Site code *The Site code is automatically populated when a Site name is selected	Hospital Site name	Ward name	Specialty 1	Specialty 2	Total monthly planned staff hours	Total monthly actual staff hours	rate - registered nurses/midwiv es (%)	Average fill rate - care staff (%)	rate - registered nurses/midwiv es (%)	Average fill rate - care staff (%)						
RP401	Great Ormond Street Hospital Central London Site -	Badger Ward	340 - RESPIRATORY		2392	1995.5	356	356.5	2139	1926	356	239.7	83.4%	100.1%	90.0%	67.3%
RP401	Great Ormond Street Hospital Central London Site	Bear Ward	170 - CARDIOTHORACIC SURGERY	321 - PAEDIATRIC CARDIOLOGY	2852	3076.05	609	732	2852	2704	356	381.4	107.9%	120.2%	94.8%	107.1%
RP401	Great Ormond Street Hospital Central London Site	Flamingo Ward	192 - CRITICAL CARE MEDICINE		6951	6748.17	352	318	6541	6306.3	193	151.9	97.1%	90.3%	96.4%	78.7%
RP401	Great Ormond Street Hospital Central London Site	Miffy Ward (TCU)	340 - RESPIRATORY MEDICINE		713	732.8	1069	924.5	713	606.6	713	634.5	102.8%	86.5%	85.1%	89.0%
RP401	Great Ormond Street Hospital Central London Site	Neonatal Intensive Care Unit Paediatric Intensive Care	192 - CRITICAL CARE MEDICINE 192 - CRITICAL CARE		3208	3571.48	356	0	3208	2810.2	0	0	111.3%	0.0%	87.6%	-
RP401	Great Ormond Street Hospital Central London Site -	- Unit	MEDICINE		6060	7077.22	356	263.8	6060	5482.26	356	108	116.8%	74.1%	90.5%	30.3%
RP401	Great Ormond Street Hospital Central London Site	Elephant Ward	370 - MEDICAL ONCOLOGY	823 - HAEMATOLOGY	1679	1956.52	356	419.7	1426	1311.4	356	292.3	116.5%	117.9%	92.0%	82.1%
RP401	Great Ormond Street Hospital Central London Site	Fox Ward	303 - CLINICAL HAEMATOLOGY	313 - CLINICAL IMMUNOLOGY and ALLERGY	2090	2034.05	348	230	1933	1467.8	348	216	97.3%	66.1%	75.9%	62.1%
RP401	Great Ormond Street Hospital Central London Site	Giraffe Ward	313 - CLINICAL IMMUNOLOGY and ALLERGY	350 - INFECTIOUS DISEASES	1066	1253.5	355	184	1066	876.2	355	118.8	117.6%	51.8%	82.2%	33.5%
RP401	Great Ormond Street Hospital Central London Site	Lion Ward	370 - MEDICAL ONCOLOGY	303 - CLINICAL HAEMATOLOGY	1675	1631.55	355	286.05	1423	1134.4	355	244.6	97.4%	80.6%	79.7%	68.9%
RP401	Great Ormond Street Hospital Central London Site -	Penguin Ward	330 - DERMATOLOGY	410 - RHEUMATOLOGY	948	1244.28	350	593.8	700	637.6	350	54.7	131.3%	169.7%	91.1%	15.6%
RP401	Great Ormond Street Hospital Central London Site	Robin Ward	350 - INFECTIOUS DISEASES	313 - CLINICAL IMMUNOLOGY and ALLERGY	1993	1645	349	310.5	1746	1295.4	349	274.9	82.5%	89.0%	74.2%	78.8%
RP401	Great Ormond Street Hospital Central London Site	Bumblebee Ward	171 - PAEDIATRIC SURGERY	420 - PAEDIATRICS	2433	2300.17	347	644	2085	2015.88	695	621.2	94.5%	185.6%	96.7%	89.4%
RP401	Great Ormond Street Hospital Central London Site	Butterfly Ward	370 - MEDICAL ONCOLOGY	420 - PAEDIATRICS	2852	2311.3	356	621	2139	1255.3	356	327.5	81.0%	174.4%	58.7%	92.0%
RP401 RP401	Great Ormond Street Hospital Central London Site - Great Ormond Street Hospital Central London Site -	 Eagle Ward Kingfisher Ward 	361 - NEPHROLOGY 420 - PAEDIATRICS		2136 1776	3181.7 1750.35	665 914	854 587.5	1331 312	1413.8 492.3	332 0	210.1 10.8	149.0% 98.6%	128.4% 64.3%	106.2% 157.8%	63.3%
RP401	Great Ormond Street Hospital Central London Site	Rainforest Ward (Gastro)	301 - GASTROENTEROLOGY		966	1076.25	713	299	713	752.9	713	287.1	111.4%	41.9%	105.6%	40.3%
RP401	Great Ormond Street Hospital Central London Site	Rainforest Ward (Endo/Met)	302 - ENDOCRINOLOGY		1069	1154.55	713	253	1069	919.7	356	231	108.0%	35.5%	86.0%	64.9%
RP401	Great Ormond Street Hospital Central London Site	Mildred Creak	711- CHILD and ADOLESCENT PSYCHIATRY		1116	1081.85	612	544.8	507	401	454	413.2	96.9%	89.0%	79.1%	91.0%
RP401	Great Ormond Street Hospital Central London Site	Koala Ward	150 - NEUROSURGERY	421 - PAEDIATRIC NEUROLOGY	3135	3061.2	332	538	3028	2785.6	332	75.6	97.6%	162.0%	92.0%	22.8%
RP401	Great Ormond Street Hospital Central London Site -	Peter Pan Ward	120 - ENT	160 - PLASTIC SURGERY	1575	1471.2	609	356.5	1460	1367.1	0	34.5	93.4%	58.5%	93.6%	-
RP401	Great Ormond Street Hospital Central London Site	Sky Ward	110 - TRAUMA & ORTHOPAEDICS	171 - PAEDIATRIC SURGERY	1886	1836.7	660	862	1833	1643.95	0	0	97.4%	130.6%	89.7%	-
RP401	Great Ormond Street Hospital Central London Site	Squirrel Ward	171 - PAEDIATRIC SURGERY	101 - UROLOGY	2954	3111.91	701	591	2649	2444.5	0	223.7	105.3%	84.3%	92.3%	-

Appendix 2: Overview of Ward Nurse Staffing – November 2105

			Regist	ered Nursing	staff	N	on Registered	d					Recruitment Pipeline				
Division	Ward	Established Bed Numbers	Proposed Funded Establishment	Staff in Post	Vacancies	Proposed Funded establishment	Staff in Post	Vacancies	Total Estabslishment	Total Vacancies	Bank Used	Net Vacant	Registered Starters	Non- registered Starters	Number of unsafe shifts	Average Bed Closures	
	Badger	15	39.5	40.9	-1.4	7.5	5.2	2.3	47.0	0.9	3.9	-3.0	0.0	0	0	0.0	
	Bear	22	47.7	46.2	1.5	9.0	9.4	-0.4	56.7	1.1	5.5	-4.4	6.0	0	0	0.1	
CCCR	Flamingo	17	121.0	96.3	24.7	10.8	4.0	6.8	131.8	31.5	21.4	10.1	5.0	1	0	0.0	
8	Miffy (TCU)	5	14.1	13.4	0.7	7.8	6.5	1.3	21.9	2.0	5.4	-3.4	0.0	1	0	0.0	
	NICU	8	51.5	46.6	4.9	5.2	0.0	5.2	56.7	10.1	11.3	-1.2	6.0	0	0	0.0	
	PICU	13	83.0	107.8	-24.8	8.9	3.0	5.9	91.9	-18.9	6.8	-25.7	3.0	0	0	0.0	
	Elephant	13	25.0	22.7	2.3	5.0	4.1	0.9	30.0	3.2	2.2	1.0	4.0	0	0	0.0	
	Fox	10	31.0	28.1	2.9	5.0	4.9	0.1	36.0	3.0	1.8	1.2	0.0	0	0	0.8	
ICI-LM	Giraffe	7	19.0	18.8	0.2	3.1	3.0	0.1	22.1	0.3	0.3	0.0	1.0	0	0	0.0	
<u>:</u>	Lion	11	22.0	21.9	0.1	4.0	3.0	1.0	26.0	1.1	3.1	-2.0	1.0	0	0	0.0	
	Penguin	9	15.5	15.8	-0.3	5.8	5.6	0.2	21.3	-0.1	1.5	-1.6	0.0	0	0	0.0	
	Robin	10	27.2	24.7	2.5	4.5	4.6	-0.1	31.7	2.4	4.5	-2.1	0.0	0	0	0.8	
	Bumblebee	21	38.3	33.8	4.5	9.7	9.0	0.7	48.0	5.2	8.7	-3.5	2.0	2	0	0.5	
lPP	Butterfly	18	37.2	31.4	5.8	10.5	8.9	1.6	47.7	7.4	2.8	4.6	1.0	1	0	0.1	
	Eagle	24	20.5	22.0	6.5	10.5	40.0	0.5	50.0	7.0		2.6	4.0	0	0	1.2	
γs	Kingfisher	21	39.5	33.0	6.5	10.5	10.0	0.5	50.0	7.0	3.4	3.6	4.0	0	0	1.3	
MDTS	Rainforest Gastro	16 8	17.1 17.0	15.2	1.9 2.1	6.2 4.0	5.8	0.4	23.3	2.3	1.7	0.6 1.0	0.0	0	0	0.0	
	Rainforest Endo/Met	8	15.6	14.9 15.6	0.0	5.2	3.5 3.5	1.7	20.8	1.7	1.6	0.1	2.0	1	0	0.4	
											-						
Neuro- scienc es	Mildred Creak	10	11.8	11.2	0.6	7.8	6.6	1.2	19.6	1.8	0.5	1.3	0.0	0	0	0.0	
Ne. sci	Koala	24	48.2	43.4	4.8	7.8	5.0	2.8	56.0	7.6	1.8	5.8	0.0	0	0	0.1	
>	Peter Pan	16	24.5	24.6	-0.1	5.0	5.0	0.0	29.5	-0.1	0.9	-1.0	1.0	0	0	0.0	
Surgery	Sky	18	31.0	25.6	5.4	5.2	5.0	0.2	36.2	5.6	3.7	1.9	1.0	0	0	0.4	
Su	Squirrel	22	43.6	42.6	1.0	7.0	6.0	1.0	50.6	2.0	4.9	-2.9	1.0	0.6	0	0.0	
	TRUST TOTAL:	322	820.3	774.5	45.8	155.5	121.6	33.9	975.8	79.7	99.3	-19.6	40.0	7.6	0.0	4.5	