NHS
Great Ormond Street
Hospital for Children
NHS Foundation Trust

1. Summary

This report on GOSH Safe Staffing covers the reporting period for August and September 2020. The paper provides the required assurance that GOSH had safe nurse staffing levels across all in-patient ward areas and appropriate systems in place to manage the demand for nursing staff. The report includes measures taken to ensure safe staffing throughout the Trust as we worked towards resuming normal activity through early phase 3 (1st August 2020).

1.1 Building competence and confidence

Throughout phase three and in an effort to support our response, we continue to grow and develop our nursing workforce at every level.

- Welcomed 105 newly qualified nurses (NQNs), 51 of which had transitioned from their Aspirant Nurse roles and were able to be included in the workforce numbers from the 24th September, as a result of work undertaken over phase two and early phase three to prepare and upskill this cohort.
- Recruited and appointed 14 of our Healthcare Support Workers (HCSW) and 4 external candidates to the Registered Nurse (RN) Apprenticeship
- 9 Nursing Associates appointed to RN Top Up Apprenticeship
- Recruited and appointed the first cohort of 6 Chief Nurse Junior Fellows an exciting new initiative for Band 5 nurses to develop their clinical leadership skills
- 21 Band 6 nurses internally recruited and appointed to the Junior Sister/Charge Nurse development programme, with a 60% increase in applications from 2019. The impact and contribution of this role from the 2019 cohort was highly valued and praised during Phase 1 of the pandemic.
- Matron development programme commenced

1.2 Health and Well-being (H&WB)

A high proportion of staff were able to take annual leave to rest and recover ahead of the second surge and winter pressures throughout August and September. We also continue to promote the Health and Wellbeing hub, who have further increased their support and offer as a result of enhanced training and the development of the peer support network.

2. Nursing Vacancy and Voluntary Turnover Rate

The Trust registered nursing vacancy rate was 10.10% in August and dropped to 6.9% in September. The peak in August was attributable to staff relocation post initial lockdown in phase 1 and the completion of financial 'phasing in' of posts to the budgeted establishment of 46.5 WTE, increasing from 1568.7 WTE to 1615.2 WTE in total. The RN vacancy rate dropped in September due to the appointment of 105 NQNs.

Nursing voluntary turnover was 13.3% in September which is below trust target and is expected to drop further due to ongoing travel restrictions and the second lockdown. However this pattern is being observed across London trusts and it is anticipated that it may increase sharply as restrictions are lifted, which must be planned for.
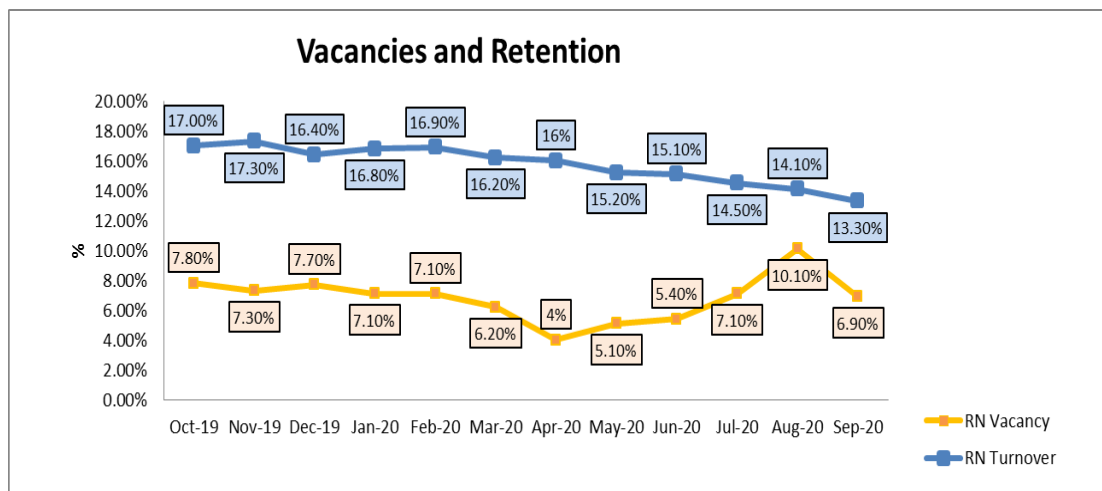
Fig.1 Registered Nurse vacancy and voluntary turnover rate (12 month view)

3. Temporary Staffing

The total shifts requested has increased to 2297 in August and 2024 in September compared to the previous reporting period. However it is more than 1,000 less than this time last year. Contributory factors to the recent upturn include increased bank usage in the Operations and Imaging directorate due to the uplift in theatre and radiology lists while managing sickness and vacancy rates and a peak in turnover across some directorates due to staff relocation post initial lockdown. Other factors which will continue to impact on bank usage include shifts to cover sickness, self-isolation, shielding, and study leave, high levels of maternity leave and deployment of staff to the NCL South Hub. Overall the figures demonstrate an improved trajectory in relation to number of shifts requested, usage and fill rates. This is as a result of greater scrutiny of actual bank need by ward managers and matrons and improved allocation of resource. We continue to monitor usage and its impact via the Nursing Workforce Assurance Group (NWAG). Bank shifts continue to be paid at the higher Covid rate and is due for review.
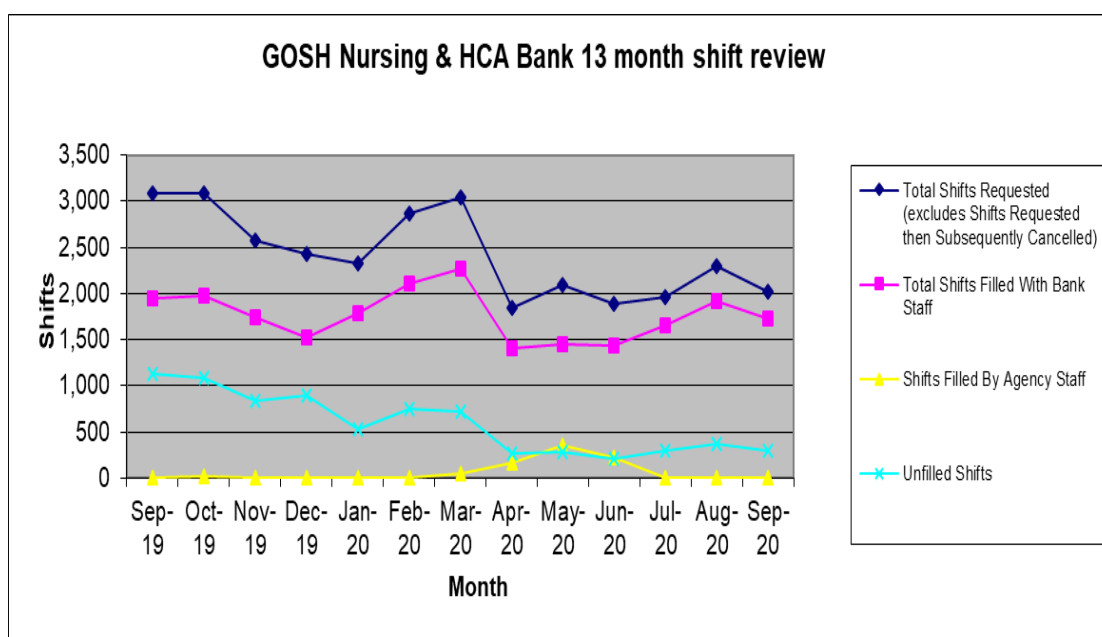

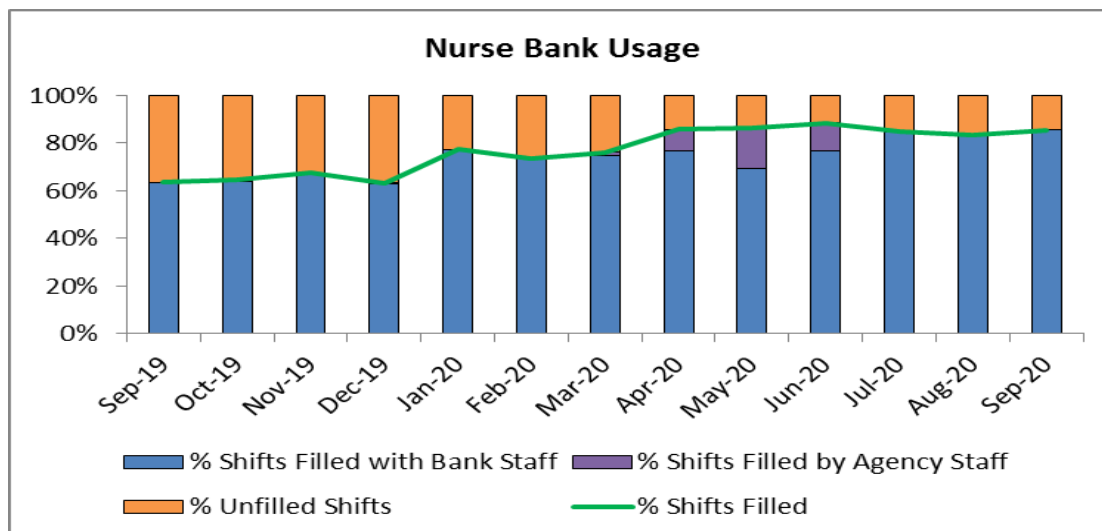*Fig.2 Nurse Bank Shift Demand (13 month view)*

Fig.3 Nurse Bank Fill Rate (13 month view)

4. Incident Reporting

There was one datix incident initially categorised as a safe staffing incident in August for the Heart and Lung directorate however since review by the Directorate Head of Nursing this has been re-categorised and downgraded. There were no datix incidents reported in relation to safe staffing in September.

5. Actual vs Planned

Actual vs Planned (AvP) Hours shows the percentage of Nursing & Healthcare Assistant (HCA) staff who worked (including Bank) as a percentage of planned care hours in month. The National Quality Board recommendations are that the parameters should be between 90-110%. The overall fill rate of AvP was 88.76% in August and 86.42% in September, both of which are marginally below the NQB recommended range. This is attributable to greater unplanned unavailability due to a drive to increase annual leave uptake ahead of winter pressures and a second surge. Any unfilled shifts or lowered staffing levels were mitigated through bed closure. The method of data extraction as part of the data cleanse process has also changed to ensure greater accuracy. There is no longer a requirement to report this data nationally and is included for information.

	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20
Upper Limit 110%	110%	110%	110%	110%	110%	110%	110%	110%	110%	110%	110%	110%
Actual vs Planned	101%	98%	97%	102%	102%	92%	111%	111%	103%	107%	89%	86%
Lower Limit 90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
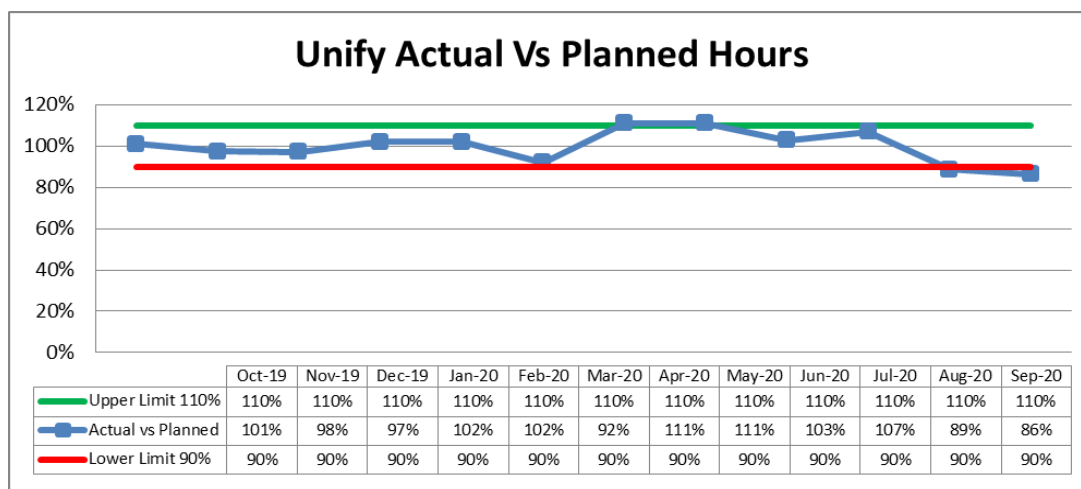
Fig.4 Actual versus Planned Nurse Fill rate 12 month view

6. **Care Hours Per Patient Day (CHPPD)**

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

CHPPD includes total staff time spent on direct patient care but also on activities such as preparing medicines, updating patient records and sharing care information with other staff and departments. It covers both temporary and permanent care staff but excludes nursing students and staff working across more than one ward. CHPPD relates only to hospital wards where patients stay overnight. When we report CHPPD we exclude the 3 ICUs to give a more representative picture across the Trust. The reported CHPPD for August was 17.9 and for September was 17. We also benchmark against our peers (other children's hospitals) with available data (last published pre Covid Feb 2020), this includes trust level CHPPD and two random specialities.

Trust Name	Trust average	Neuro	Haem/Occ
GOSH	17.36	13.25	13.5
Alder Hey	13.91	13.22	12.2
Sheffield CH	13.53	13.99	11.37
Birmingham CH	11.2	7.7	11.74

Fig.5 Peer Benchmarking based on most recently published data (Feb 2020)

Safe Nurse Staffing Report for reporting period August - September 2020

Appendix 1: August & September Workforce metrics by Directorate

Aug-20						
Directorate	Actual vs Planned %	CHPPD (exc ICUs)	RN Vacancies (FTE)	RN Vacancies (%)	Voluntary Turnover* %	Sickness (1 mnth) %	Maternity %
Blood, Cells & Cancer	90%	15	13.99	6.02%	8.83%	2.38%	9.17%
Body, Bones & Mind	94%	14.8	23.71	10.01%	17.93%	1.78%	5.68%
Brain	91%	15.2	18.67	13.73%	12.49%	1.63%	4.76%
Heart & Lung	83%	13.5	46.88	8.59%	15.43%	3.53%	4.55%
International	82%	17.6	19.74	18.90%	18.47%	3.00%	3.23%
Operations & Images	N/A	N/A	28.33	12.60%	15.64%	2.93%	6.13%
Sight & Sound	93%	15.9	3.53	7.12%	9.47%	1.99%	5.88%
Research & Innovation	N/A	N/A	15.89	26.95%	11.65%	2.05%	4.35%
Trust	88%	17.9	159.35	10.05%	14.03%	2.78%	5.28%

*Fig. 1 August Nursing Workforce Performance *Relates to all RN grades*

Sep-20						
Directorate	Actual vs Planned %	CHPPD (exc ICUs)	RN Vacancies (FTE)	RN Vacancies (%)	Voluntary Turnover* %	Sickness (1 mnth) %	Maternity %
Blood, Cells & Cancer	89%	13.9	6.77	2.92%	8.35%	2.55%	8.50%
Body, Bones & Mind	97%	13.7	13.45	5.65%	17.02%	1.94%	5.74%
Brain	91%	13.6	17.99	12.85%	10.66%	1.88%	5.34%
Heart & Lung	79%	14.1	25.87	4.74%	14.29%	4.12%	4.20%
International	73%	20.3	17.66	16.90%	16.02%	3.94%	3.19%
Operations & Images	N/A	N/A	24.51	10.91%	14.54%	3.68%	5.96%
Sight & Sound	89%	14.5	2.28	4.59%	8.39%	1.83%	5.77%
Research & Innovation	N/A	N/A	13.78	23.37%	9.48%	3.55%	6.25%
Trust	86%	17	109.43	6.94%	13.28%	3.23%	5.39%

*Fig. 2 September Nursing Workforce Performance *Relates to all RN grades*