

Introduction

This report provides information on planned versus actual nurse and midwifery staffing for August and September 2018 and an update on progress with the reduction in use of agency staff in the nursing and midwifery workforce.

Planned versus actual staffing

The overall trust summary of planned versus actual hours for August was that actual hours were 3% less than planned hours. Hospital specific data is as follows:

- Barnet hospital 5% less actual hours than planned
- Chase Farm hospital 15% less actual hours than planned
- Royal Free hospital Actual hours met planned

The fill rates for registered nurses on the day shifts during August were particularly challenging with Barnet hospital having a fill rate of 84% and Royal Free hospital having a fill rate of 88%.

The overall trust summary of planned versus actual hours for September was that actual hours were 4% less than planned hours. Hospital specific data is as follows:

- Barnet hospital 5% less hours than planned
- Chase Farm hospital 14% less actual hours than planned
- Royal Free hospital 2% less actual hours than planned

The same issue with fill rates for registered nurses on the day shifts continued in September with Barnet hospital having a fill rate of 83% and the Royal Free hospital having a fill rate of 89%

The tables below show that planned versus actual hours by hospital and ward for registered nurses and midwives and healthcare assistants for August and September:

Barnet Hospital August 2018									
Ward	Beds	Registered nurse to patient ratio Day Shift	Percent of actual vs total planned shifts (RN days)	Percent of actual vs total planned shifts (RN nights)	Percent of actual vs total planned shifts (HCA days)	Percent of actual vs total planned shifts (HCA nights)	Falls	Attributable Cdiff	FFT Score
Beech	24	1:6	76%	94%	99%	107%	3	0	91%
CCU	8	1:2	91%	100%	n/a	n/a	0	0	94%
Cedar	24	1:4	84%	71%	96%	108%	4	0	80%
Damson	24	1:6	90%	100%	92%	103%	4	0	87%
ED	n/a	vary	90%	96%	111%	138%	4	0	83%
Galaxy	30	1:4	71%	79%	93%	n/a	1	0	n/a
ITU	vary	1:1/1:2	87%	88%	94%	94%	0	1	n/a
Juniper	24	1:4.8	85%	98%	94%	153%	9	1	75%
Larch	22	1:5.5	79%	95%	108%	153%	5	0	100%
MSSU	48	1:4.8	83%	90%	128%	118%	6	1	86%
Mulberry	13	1:5	85%	95%	160%	206%	1	0	77%
Olive	22	1:5.5	81%	99%	100%	155%	1	0	78%
Palm	22	1:5.5	94%	99%	95%	148%	4	1	80%
Rowan	24	1:4.8	88%	99%	122%	113%	2	0	89%
Spruce	24	1:6	71%	97%	122%	107%	4	1	100%
Walnut	24	1:6	82%	103%	119%	114%	1	0	85%
Willow	16	1:5.3	92%	95%	124%	131%	1	0	71%
Victoria	48	1:8	90%	96%	93%	91%	0	0	100%

Chase Farm Hospital August 2018									
Ward	Beds	Registered nurse to patient ratio Day Shift	Percent of actual vs total planned shifts (RN days)	Percent of actual vs total planned shifts (RN nights)	Percent of actual vs total planned shifts (HCA days)	Percent of actual vs total planned shifts (HCA nights)	Falls	Attributable Cdiff	FFT Score
Capetown	36	1:5.1	95%	97%	105%	110%	5	0	100%
UCC (CF)	n/a	vary	100%	89%	80%	100%	0	0	n/a
Wel'gton	39	1:6.5	62%	64%	94%	79%	2	0	97%

Royal Free Hospital August 2018									
Ward	Beds	Registered nurse to patient ratio Day Shift	Percent of actual vs total planned shifts (RN days)	Percent of actual vs total planned shifts (RN nights)	Percent of actual vs total planned shifts (HCA days)	Percent of actual vs total planned shifts (HCA nights)	Falls	Attributable Cdiff	FFT Score
12 West	15	vary	108%	140%	206%	242%	1	0	100%
12 South	16	1:4	96%	91%	146%	203%	2	0	100%
11 West	22	1:4.8	77%	97%	133%	190%	3	0	100%
11 East	24	1:4.8	87%	100%	126%	151%	12	0	95%
10 West	27	1:5	95%	100%	106%	114%	1	0	88%
10 South	25	1:6	86%	95%	102%	145%	4	0	75%
10 East	24	1:3.4	101%	113%	126%	153%	4	0	83%
10 North	32	1:5.3	76%	100%	122%	103%	8	0	93%
9 West	33	1:4	72%	96%	140%	129%	3	0	82%
9 North	33	1:4.7	84%	105%	128%	150%	5	0	80%
8 West	32	1:5.1	79%	94%	112%	112%	7	0	69%
8 East	26	1:4.3	84%	97%	105%	108%	2	0	95%
8 North	32	1:4	90%	99%	103%	113%	2	0	83%
7 West	32	1:4.5	68%	90%	127%	139%	8	0	81%
7 East A	20	1:5	81%	94%	122%	150%	1	0	100%
7 East B	13	1:4.3	81%	94%	122%	150%	0	0	100%
7 North	24	1:5	81%	90%	115%	145%	5	0	88%
6 West	vary	vary	77%	100%	19%	n/a	0	0	n/a
6 South	28	1:4	84%	99%	147%	158%	3	0	88%
6 North	20	1:4	67%	76%	1638%	n/a	0	0	n/a
5 South	31	1:8	90%	92%	91%	96%	0	0	97%
5 East B	24	1:5	98%	98%	102%	116%	6	1	98%
5 North A	18	1:6	98%	100%	99%	103%	1	0	80%
NRC	14	1:5	93%	95%	113%	129%	0	0	n/a
ITU	vary	1:1/1:2	105%	108%	78%	66%	1	1	n/a
ED	n/a	vary	94%	101%	93%	98%	1	0	89%

Barnet Hospital September 2018									
Ward	Beds	Registered nurse to patient ratio Day Shift	Percent of actual vs total planned shifts (RN days)	Percent of actual vs total planned shifts (RN nights)	Percent of actual vs total planned shifts (HCA days)	Percent of actual vs total planned shifts (HCA nights)	Falls	Attributable Cdiff	FFT Score
Beech	24	1:6	68%	96%	112%	104%	3	0	42%
CCU	8	1:2	90%	100%	n/a	n/a	1	0	100%
Cedar	24	1:4	77%	76%	109%	102%	2	0	78%
Damson	24	1:6	79%	100%	98%	103%	6	1	95%
ED	n/a	vary	90%	96%	93%	98%	5	0	79%
Galaxy	30	1:4	71%	79%	186%	n/a	2	0	n/a
ITU	vary	1:1/1:2	90%	97%	74%	93%	1	0	n/a
Juniper	24	1:4.8	93%	96%	89%	152%	6	2	80%
Larch	22	1:5.5	73%	88%	107%	160%	2	1	67%
MSSU	48	1:4.8	80%	87%	114%	114%	10	0	86%
Mulberry	13	1:5	103%	95%	142%	214%	1	0	100%
Olive	22	1:5.5	84%	96%	92%	146%	3	1	83%
Palm	22	1:5.5	87%	97%	88%	146%	6	0	100%
Rowan	24	1:4.8	89%	101%	131%	123%	3	0	100%
Spruce	24	1:6	69%	84%	109%	124%	3	0	100%
Walnut	24	1:6	75%	97%	123%	123%	5	0	71%
Willow	16	1:5.3	95%	97%	101%	102%	2	0	77%
Victoria	48	1:8	89%	94%	100%	97%	1	0	100%

Chase Farm Hospital September 2018									
Ward	Beds	Registered nurse to patient ratio Day Shift	Percent of actual vs total planned shifts (RN days)	Percent of actual vs total planned shifts (RN nights)	Percent of actual vs total planned shifts (HCA days)	Percent of actual vs total planned shifts (HCA nights)	Falls	Attributable Cdiff	FFT Score
Capetown	36	1:5.1	93%	90%	102%	105%	5	0	100%
UCC (CF)	n/a	vary	100%	89%	80%	100%	0	0	n/a
Surgical	39	1:6.5	82%	54%	82%	77%	0	0	n/a

Royal Free Hospital September 2018									
Ward	Beds	Registered nurse to patient ratio Day Shift	Percent of actual vs total planned shifts (RN days)	Percent of actual vs total planned shifts (RN nights)	Percent of actual vs total planned shifts (HCA days)	Percent of actual vs total planned shifts (HCA nights)	Falls	Attributable Cdiff	FFT Score
12 West	15	vary	101%	148%	212%	221%	1	0	100%
12 South	16	1:4	90%	89%	116%	141%	2	0	n/a
11 West	22	1:4.8	72%	102%	132%	190%	0	0	89%
11 East	24	1:4.8	85%	95%	135%	188%	6	0	100%
10 West	27	1:5	94%	99%	112%	114%	3	0	96%
10 South	25	1:6	80%	99%	119%	143%	2	0	91%
10 East	24	1:3.4	93%	122%	162%	138%	3	0	86%
10 North	32	1:5.3	83%	98%	107%	102%	4	0	88%
9 West	33	1:4	78%	97%	91%	115%	3	0	88%
9 North	33	1:4.7	83%	97%	137%	189%	4	0	86%
8 West	32	1:5.1	90%	93%	100%	120%	7	0	100%
8 East	26	1:4.3	90%	97%	120%	106%	3	0	94%
8 North	32	1:4	90%	101%	124%	144%	5	0	68%
7 West	32	1:4.5	65%	95%	122%	143%	5	0	85%
7 East A	20	1:5	83%	100%	106%	116%	0	0	89%
7 North	24	1:5	97%	88%	109%	143%	2	0	91%
6 West	vary	vary	69%	98%	27%	n/a	0	0	n/a
6 South	28	1:4	83%	98%	139%	145%	3	0	83%
6 North	20	1:4	77%	82%			0	0	n/a
5 South	31	1:8	91%	91%	88%	96%	0	1	82%
5 East B	24	1:5	96%	97%	92%	101%	1	0	83%
5 North A	18	1:6	92%	99%	101%	100%	0	0	91%
NRC	14	1:5	95%	92%	106%	123%	2	0	n/a
ITU	vary	1:1/1:2	105%	109%	80%	71%	0	1	n/a
ED	n/a	vary	94%	101%	93%	98%	0	0	88%

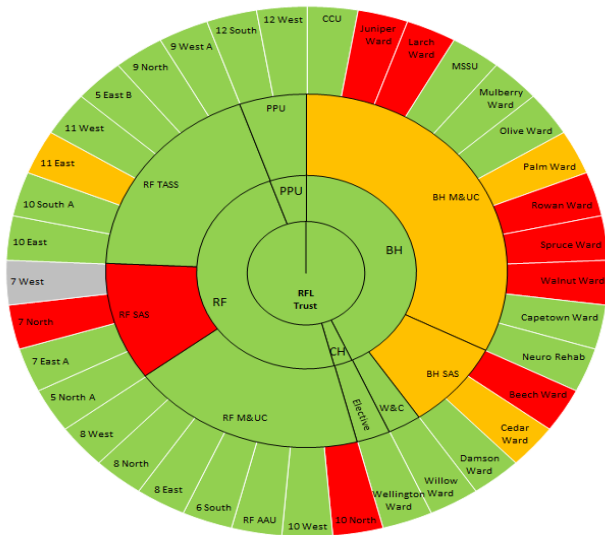
Safe staffing.

Each ward across the trust measures the dependency and acuity of each patient twice a day which is then matched against the available staff on the ward. This can be then considered for the trust as a whole, each hospital, each division and then each ward.

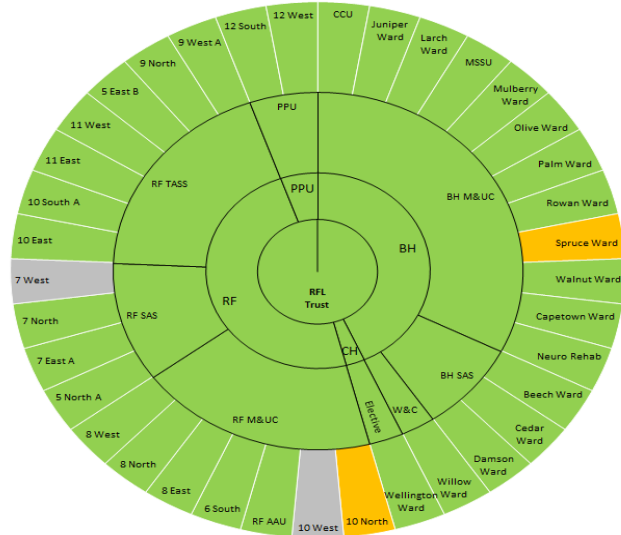
A green rating is where the rostered care hours are greater than or up to 5% less than the required care hours according to the acuity and dependency score recorded, amber is where is between 5 – 10% less than required and red is where the hours are 10% less than required. For August and September the particular difficulty with filling the day shifts at

Barnet and the Royal Free hospitals can be seen reflected in the number of wards rated as red.

Day Shifts August 2018



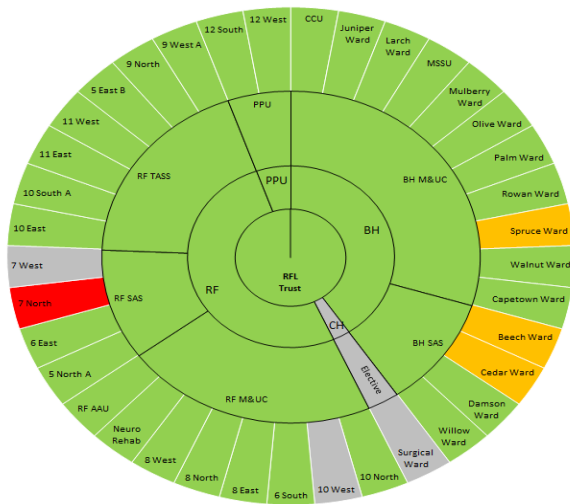
Night Shifts August 2018



Day Shifts September 2018



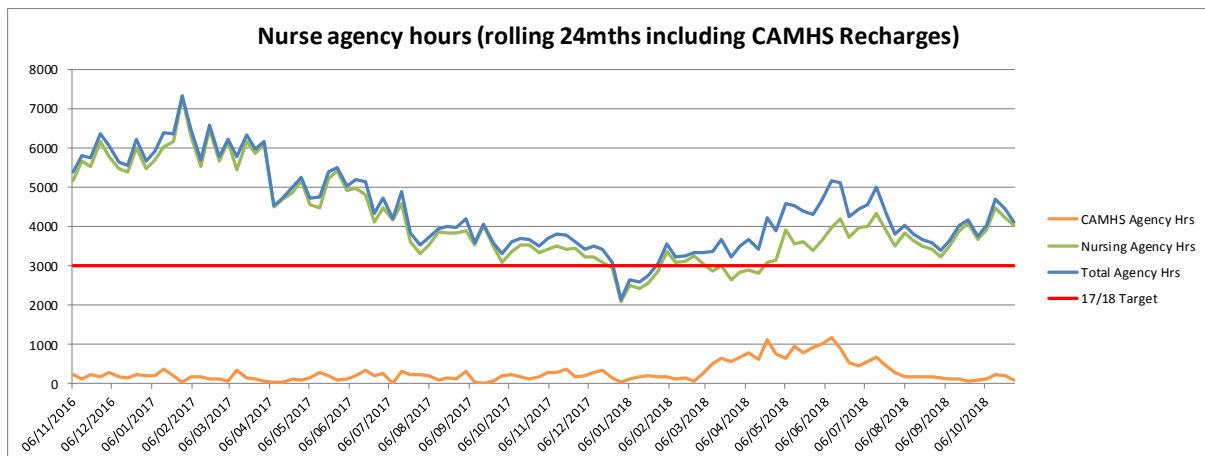
Night Shifts September 2018



Since the introduction of SafeCare Live it was always planned for its use to be integrated into the hospitals' operational procedures. A daily Safecare meeting held each morning, at Barnet and Royal Free hospital led by a divisional director of nursing, attended by the matrons. Each clinical inpatient area is evaluated and risk assessed for their staffing levels using the SafeCare live acuity and dependency data in conjunction with agreed professional judgement RAG rating guidance. The meetings allows for staffing issues to be escalated, actions agreed and identified staff to be redeployed to mitigate risks identified. This is electronically documented through SafeCare Live.

Registered nurse agency staff

There is increasing demand for temporary staff relating to the increase in the vacancy rate. In August 2018 20,000 more temporary staffing hours were requested than in August 2017. The temporary staffing office increased the number of hours they filled by 10,000 but could not meet the demand.



The agreed protocols and approvals remain in place however there are increasing numbers of requests to request agency staff earlier particularly at Barnet in areas of high vacancy such as MSSU and the surgical wards. In October there has been difficulty also in filling shifts for the paediatric ward which has resulted in the ward being closed on a few occasions. The increase in demand in paediatrics is being driven by the number of staff who are currently on maternity leave.

Recruitment

In September 95 new nursing staff joined the trust and in October there were a further 132 that joined. There are currently 272 new nursing staff in the pipeline.

Professional Judgement RAG Rating	Action (Actions to mitigate risk)	In Hours escalation process
<ul style="list-style-type: none"> ➤ Staffing levels as planned on staff roster and meet current patient acuity and dependency needs ➤ Staffing levels below planned level on the staff roster but meet current patient acuity and dependency needs ➤ Staff working within capacity and capability 	<ul style="list-style-type: none"> ➤ Monitor on-going basis ➤ No further action 	<p>Monitor on-going basis No escalation required</p>
<ul style="list-style-type: none"> ➤ Staffing levels as planned on the staff roster but do not meet current patient acuity and dependency needs ➤ Staffing levels below planned on the staff roster and do not meet current patient acuity and dependency needs ➤ Staff working above planned capacity and capability 	<ul style="list-style-type: none"> ➤ Staff prioritise workload during shift ➤ Ward Sister/Charge Nurse works in non-supervisory capacity for part/all of the shift ➤ Review patient acuity and dependency ➤ Staff redeployed from other areas within division ➤ Review staff on study leave and consider their recall ➤ Review staffing levels for subsequent shifts 48hours in advance ➤ Confirm temporary staffing shifts are approved for bank/agency fill 	<p>Monday to Friday 08:00-16:00hrs: Ward Sister/Charge Nurse/Nurse in Charge escalates to the directorate divisional matron</p>
<ul style="list-style-type: none"> ➤ Staffing levels significantly below planned level on staff roster and determined to be at an unsafe level. ➤ Unable to meet patient acuity and dependency needs with current staffing. ➤ Less than 2 registered nurses present on the ward 	<ul style="list-style-type: none"> ➤ Recall staff on nonessential activity e.g. study leave ➤ Confirm temporary staffing shifts are approved for bank/agency fill ➤ Redeploy available non-ward based staff e.g. clinical practice educators, clinical nurse specialists to cover appropriate duties ➤ Staff redeployed across divisions ➤ Contact staff on days off/leave ➤ Consider patient flow in conjunction with bed and site team ➤ Review/reduce planned patient activity in conjunction with operational managers ➤ Report on Datix 	<p>Monday to Friday 08:00-16:00hrs: Ward Sister/Charge Nurse or Nurse in Charge escalates to the directorate divisional matron</p> <p>If unmitigated matron will escalate to Divisional Nurse Director.</p>

