

Staffing Report for Ward Based Nursing and Midwifery Staffing

This data was presented to the board on 4th April 2017 as part of the Corporate Performance Report.

Safe Staffing Summary as at 28 February 2017

It is important to note that the data submitted is calculated in hours across the month. In terms of the actual 'shift' fill rate, the data below translates into an overall fill rate of 100.91% of our required shifts.

Workforce Highlights

- 19 registered nurses (RN) commenced employment within the trust of which five to ward-based areas during February 2017.
- Five band 2 HCAs and four Senior HCAs also commenced employment within the Trust.
- There were 30 new members to the Nurse Bank, including 10 RNs.
- 12 RN's left the Trust. One band 2 HCA and one band 3 HCAs also left.
- There are currently 20 pre-registration nurses who are awaiting their professional registration.

Trust	Fill Rates (% staff hrs)			
	Reg'd Nurses / Midwives		Care Staff	
	Day	Night	Day	Night
Lancashire Teaching Hospitals NHS FT	88.5 %	93.8 %	116.6 %	121.6 %
Chorley & South Ribble Hospital	96.9 %	92.9 %	101.6 %	106.3 %
Royal Preston Hospital	87.0 %	94.0 %	120.8 %	125.4 %

Recruitment and Staffing Update

The percentage fill rates for RN's show a marginal increase on nights but a very slight decrease overall on days. The fill rates for HCA's show some compensation for the decrease but as described in previous reports the overall rates do not fully reflect the significant staffing difficulties being experienced on a day to day basis in many areas compounded by continued escalation, increasing RN vacancies, ongoing high sickness rates and a reducing availability to fill shifts with temporary staff despite engaging with an 'off framework' agency.

On a daily basis staff are redeployed from the wards below to the escalated areas at both sites.

In Surgery, Ribblesdale Ward 12 and Ward 2b continue to be of particular concern.

In Medicine, Ward 17, 19, 21 and 23, and are experiencing significant staffing difficulties. The Emergency Decisions Unit also continues to be of concern with staffing difficulties and further pressure caused by increased admissions and high occupancy rates causing reduced flow through the department.

During February continuing high levels of sickness and volumes of escalated patients have put pressure on staffing resources. Additional agency staff from an off-frame work agency Thornbury have supplemented staffing to a lesser extent in February as plans to reduce reliance upon them have been implemented.

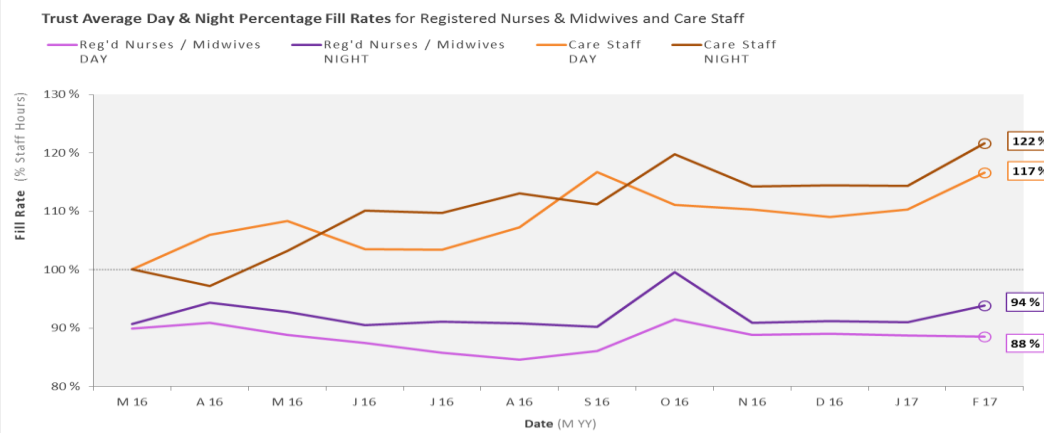
The operational impact of the shortages is being robustly managed by the Divisional Nursing Directors and Matrons. The demand for escalation beds has continued throughout February with Winstanley ward at CDH being open to at least 25 beds for the whole month and the Cardiac Cath Lab at Preston also being open for the whole month. Leyland and Surgical Unit CDH have been supporting the escalation on Winstanley, some of which is reflected in their fill rate. The additional pressure in the system has meant that on some occasions Day Case Unit has also been used to provide care for patients when no other beds have been available. The opening of yet another escalation area has added further pressure to the staffing situation.

Daily staffing meetings are undertaken on both sites to maximise safe allocation of staff and the Nursing, Midwifery and AHP Director is meeting with the Divisional Nursing Directors and Matrons on a regular basis to manage and monitor the situation.

All efforts to fill shifts through redeployment of staff, bank and agency requests and cover from clinical educators / specialist nurses continue to be deployed. Efforts to ensure efficiency of rosters and evenness of shift allocations are scrutinised by the Matrons as part of the approval process. The Surgical division has almost 100% compliance with rosters being approved 6 weeks in advance. Ward and department based staff continue to be very flexible in both undertaking extra shifts and also through their support of colleagues in other areas when asked to move from one area to another to balance the risk to patients.

All areas have rolling recruitment activity underway and our centralised programmes are continuing.

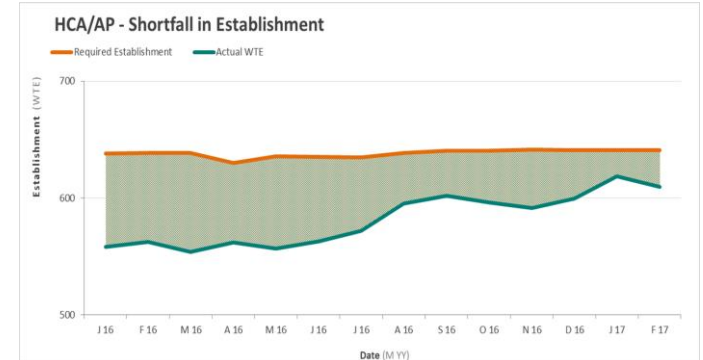
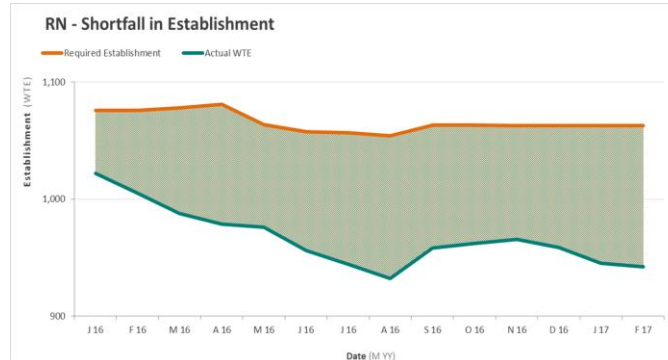
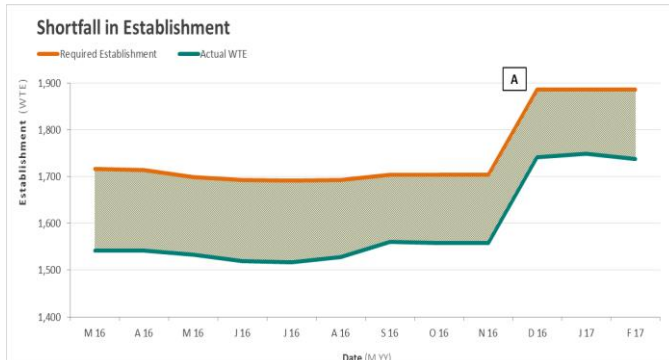
A staffing assurance report is provided monthly to the Safety and Quality Sub Committee.



In order to clearly show the increasing difficulties in recruiting RNs, the standard overall shortfall establishment graph has been split into two: RNs and non-RNs.

A - Inclusion of Critical Care Unit (CrCU)

Data Source: Required Establishment from General Ledger 'Funded WTE'. Actual WTE from ESR. The graph includes all ward areas as identified in the table on the following page. Also includes all Maternity and both EDs. Areas not included are: theatres and all non-ward-based teams & other departments.



Nursing Directorate - Safe Staffing (cont'd)

Safe Staffing Dashboard

The Safe Staffing Dashboard below shows the fill rates for February 2017 and the corresponding key performance metrics for patient safety. It also displays the sickness rate and maternity leave rate for the RN's and HCA's staff in each area. Please note that the number of pressure ulcers reported on the database currently only includes those that have been through the validation process so the figure will change over the next few weeks.

The falls incidence for February has increased from the January figure. Of the 121 falls in January 15 (12.4%) mention staffing as a contributory factor.

The safety thermometer data shows that 28 areas achieved 100% which is the same number that achieved 100% in January. The February Friends and Family overall results have decreased slightly to 86.7 from 88.3 in January. Please refer to the safety and quality sections of the board report for further information.

Feb 2017			Fill Rates (% staff hrs)				Other Workforce Stats (Q & UQ N&M)			Safe Care					Effective Care	Patient Experience
Division Cost Centre (CC) Ward Name			Reg'd Nurses / Midwives		Care Staff		Sickness Rates (FTE %)	Mat Leave Rates (FTE %)	No. of New RN&Ms	No. of MRSA Infections	No. of C. difficile Infections	No. of Inpatient Falls	No. of Medication Admin Errors	Harm Free Care %	No. of Tissue Wounds	Friends & Family Test (FFT) (Recommend %)
			Day	Night	Day	Night										
Medicine	J35429	Barton	65.8%	100.0%	116.3%	129.8%	7.2%	-	-	-	-	4	-	95.50%		81.80%
Medicine	J35446	Bleasdale	71.9%	67.9%	157.7%	136.9%	2.0%	3.1%	-	-	-	1	1	100%		100%
Medicine	J35440	Brindle	84.2%	92.9%	111.2%	98.8%	3.6%	2.8%	-	-	-	5	1	100%		82.40%
Medicine	J35423	CCU CDH	97.0%	100.0%	98.2%	100.0%	1.1%	2.1%	-	-	-	1	-	100%		96.20%
Medicine	J35420	CCU RPH	88.6%	100.0%	-	-	1.0%	-	-	-	-	1	-	100%		88.90%
Medicine	J35310	CrCU	110.2%	106.9%	132.3%	120.3%	4.9%	4.5%	1	-	1	-	3	100%		-
Surgery	J36016	Gynaecology	85.6%	100.0%	166.1%	92.9%	1.2%	6.2%	-	-	-	2	1	93.80%		85.40%
Medicine	J35438	Hazelwood	98.6%	94.6%	90.3%	107.1%	5.8%	1.3%	-	-	-	4	-	100%		92.00%
Surgery	J35104	Leyland	121.9%	100.0%	125.0%	100.0%	8.0%	-	-	-	1	1	1	96.20%		94.30%
Surgery	J35116	Major Trauma Ward	97.0%	98.2%	200.0%	94.6%	0.2%	4.6%	1	-	-	2	-	100%		91.70%
Surgery	Multiple	Maternity	84.5%	78.6%	86.2%	114.3%	3.2%	2.0%	-	-	-	-	2	100%		95.10%
Medicine	J35437	MAU CDH	86.5%	78.6%	101.8%	139.3%	5.1%	5.5%	-	-	-	5	1	100%		94.10%
Medicine	J35408	MAU RPH	85.3%	81.3%	99.4%	147.6%	2.9%	-	-	-	-	-	-	100%		87.50%
Surgery	J36109	NRU	93.8%	91.2%	107.5%	81.3%	7.2%	8.3%	-	-	-	-	6	100%		-
Medicine	J35759	NRU	82.7%	100.0%	125.7%	153.6%	7.1%	3.9%	-	-	-	-	-	100%		-
Surgery	J35020	Surgical Unit	115.2%	85.7%	92.0%	92.9%	8.9%	2.9%	-	-	1	4	1	-		85.50%
Surgery	J35905	Ribblesdale	73.4%	78.6%	161.7%	102.4%	3.9%	4.1%	1	-	-	4	4	100%		100%
Medicine	J35435	Rookwood A	99.8%	101.8%	99.9%	110.1%	4.0%	4.4%	-	-	1	7	1	95.80%		50.00%
Medicine	J35434	Rookwood B	95.6%	110.9%	98.2%	98.4%	6.7%	-	-	-	1	2	-	100%		77.80%
Surgery	J35751	Ward 2A	81.7%	98.2%	117.3%	103.6%	6.1%	-	-	-	-	1	-	100%		100%
Surgery	J35752	Ward 2B	73.8%	90.2%	119.1%	95.5%	7.3%	4.8%	-	-	-	1	-	100%		92.90%
Surgery	J35758	Ward 2C	81.4%	100.0%	139.3%	98.2%	0.9%	4.8%	-	-	-	3	-	100%		96.00%
Surgery	J35168	Ward 3	85.6%	98.2%	122.7%	100.0%	1.3%	8.6%	-	-	-	2	-	100%		87.70%
Surgery	J35726	Ward 4	80.8%	67.9%	122.7%	134.5%	3.3%	7.6%	-	-	-	5	1	100%		94.00%
Medicine	J36105	Ward 8	94.1%	95.5%	83.3%	117.9%	2.3%	1.4%	-	-	-	1	-	100%		-
Surgery	J35005	Ward 10	89.4%	103.6%	125.6%	123.2%	4.1%	5.4%	-	-	-	4	-	93.10%		88.10%
Surgery	J35011	Ward 11	75.8%	81.0%	117.0%	116.1%	6.0%	-	-	-	-	2	1	100%		100%
Surgery	J35006	Ward 12	83.1%	92.9%	111.5%	152.4%	5.9%	10.4%	-	-	-	4	-	100%		91.20%
Surgery	J35102	Ward 14	95.2%	103.6%	96.2%	132.1%	8.9%	1.7%	-	-	-	4	1	100%		100%
Surgery	J35031	Ward 15	100.0%	101.8%	130.4%	107.1%	0.3%	0.8%	-	-	-	7	-	100%		94.70%
Surgery	J35103	Ward 16	82.8%	96.5%	113.1%	142.6%	2.6%	7.0%	1	-	-	1	-	100%		85.70%
Medicine	J35753	Ward 17	75.7%	94.0%	130.4%	140.5%	5.2%	5.6%	-	-	-	5	1	100%		75.00%
Medicine	J35407	Ward 18	79.9%	78.6%	124.6%	161.9%	10.3%	2.0%	-	-	-	1	-	96.40%		81.30%
Medicine	J35451	Ward 20	86.3%	92.9%	117.6%	122.3%	10.9%	2.7%	-	-	-	9	3	86.40%		50.00%
Medicine	J35427	Ward 21	74.2%	90.2%	138.7%	173.8%	4.4%	3.0%	-	-	-	5	-	100%		81.50%
Medicine	J35449	Ward 23	62.8%	95.0%	108.9%	100.0%	6.3%	5.3%	-	-	-	6	-	94.10%		78.90%
Medicine	J35450	Ward 24	75.8%	100.0%	137.5%	134.8%	5.0%	6.2%	-	-	1	5	1	100%		86.70%
Medicine	J35853	Ward 25	91.2%	100.0%	100.5%	126.8%	4.4%	6.6%	-	-	-	4	1	95.70%		87.50%