


Board Briefing	 Guy's and St Thomas' NHS Foundation Trust
Board Briefing of Nursing and Midwifery Staffing Levels	Date of Briefing May 2019 (April 2019 data)

This paper is for:	Sponsor:	Chief Nurse - Dame Eileen Sills (DBE)	
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Discussion	<input type="checkbox"/>	Reviewed by:	Toni Lynch, Deputy Chief Nurse
Noting	<input type="checkbox"/>	CEO*	<input type="checkbox"/>
Information	<input checked="" type="checkbox"/>	ED*	<input type="checkbox"/>
		Board Committee*	<input type="checkbox"/>
		TME*	<input type="checkbox"/>
		Other*	<input type="checkbox"/>

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1.0 Summary

This briefing provides the Trust Board with an overview of the Nursing and Midwifery workforce during the month of April 2019 and is set out in line with the National Quality Board (NQB) Standards and Expectations for Safe Staffing published in 2016. It provides assurance that arrangements are in place to safely staff our services with the right number of nurses and midwives with the right skills, at the right time.

2.0 Key highlights for April 2019

- For the third month running, the vacancy rate has increased and is now at 14.4%. This is driven by an increase in the budgeted establishment due to posts agreed in business planning now appearing in the budgets. The number of staff in post has also increased this month and if the current external applicants were added to the staff in post figure, the overall vacancy rate will be 5.1%.
- The rate of agency reduced to 3.6% this month. This represents a reduction from last month and also a lower rate than in April 2018.
- Voluntary turnover for the month reduced from 1.5% to 1.0% representing a 0.5 % decrease. There were 67 leavers this month compared to 108 in March.
- Sickness increased from 3.9% last month to 4.3% this month. It was 4.1% same time last year.
- There is a slight reduction in Performance Development Review (PDR) compliance rate from 85.5% to 85.0% this month. However, it has increased by 10.1% compared to April 2018.
- Mandatory training compliance increased by 1.6% to 85.7%. It was 84.4% in April 2018.

3.0 EXPECTATION 1 – RIGHT STAFF

3.1 Evidence Based Workforce Planning

In order to ensure the safe and effective delivery of patient care it is essential that there is the right establishment of posts and the right staff in post. Table 1 sets out the current overall nursing and midwifery workforce metrics in comparison to April 2018. Tables 2 and 3 demonstrate graphically the rise in the overall nursing and midwifery establishment and the number of staff in post over the past 12 months. Notably there are an additional 150 whole time equivalent (WTE) nurses and midwives in post compared to April 2018.

Staffing measures	April 2018	April 2019	Difference	Change
Nursing Establishment WTE	6332.78	6649.63	316.85	▲
Nursing Staff in Post WTE	5540.79	5691.52	150.73	▲
Vacancies WTE	791.99	958.12	166.13	▲
Vacancy rate	12.5%	14.4%	1.9%	▲
Annual turnover	15.1%	14.7%	-0.4%	▼
Red Flags raised	80	91	11	▲
Agency % of Pay bill	3.9%	3.6%	-0.3%	▼
Planned v Actual Hrs used	95.4%	99.5%	4.1%	▲

Table 1

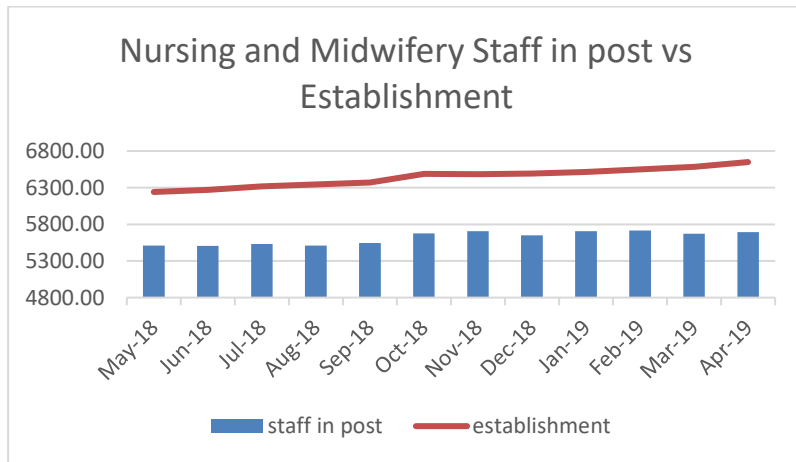


Table 2

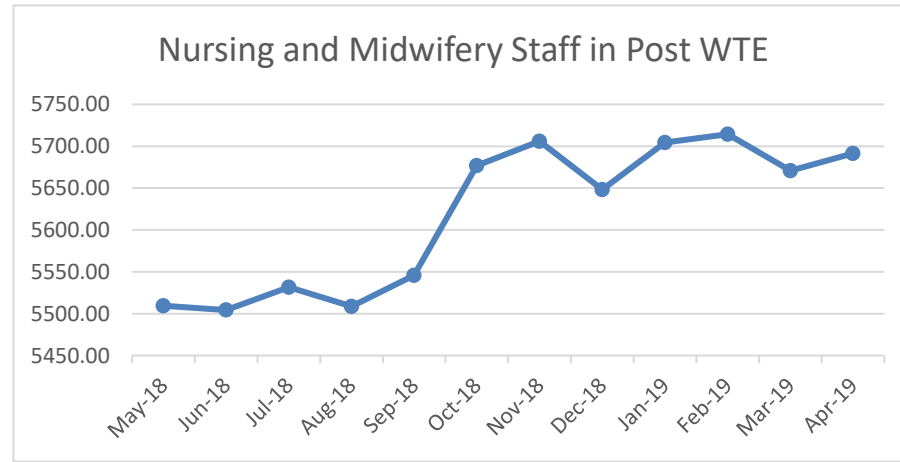


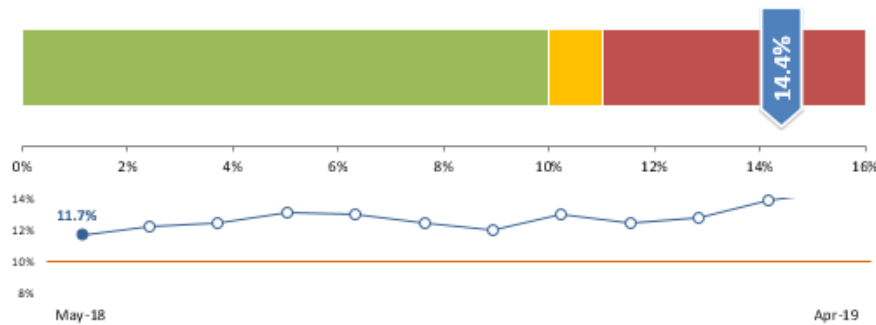
Table 3

3.2 Recruitment and Retention

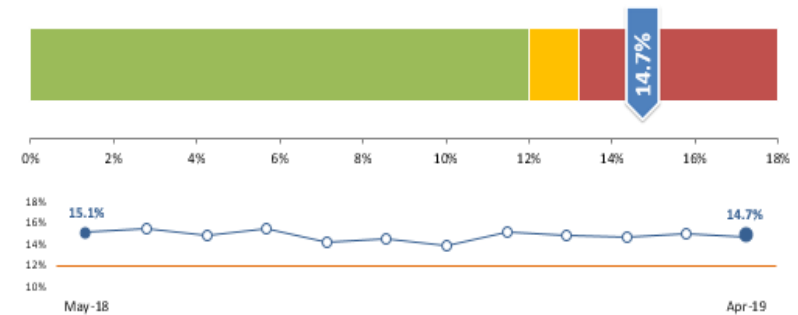
Tables 4, 5 and 6 display the trends in three key nursing and midwifery workforce metrics, namely vacancy, turnover and sickness. These demonstrate fluctuations in the vacancy rate as outlined above, partly driven by continued changes in the establishment and partly by variation of staff in post.

Active recruitment strategies continue, however, retention of our staff remains a key focus with a number of activities being undertaken Trust wide. As indicated previously the Trust is part of the Retention Collaborative led by NHSI and there are a number of new initiatives being explored and actioned, aimed specifically at the retention of staff across the organisation.

Vacancy Rate



Annual Turnover (voluntary leaving reasons only) May 2018 - Apr 2019



Sickness Absence Rate

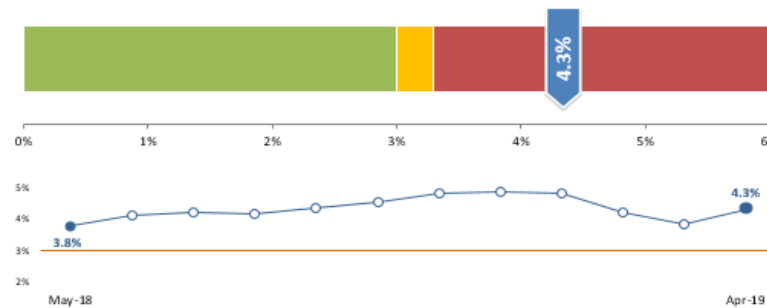


Table 6

3.3 Activity and Acuity

The number of bed days in April 2019 stood at 47,104 (Table 7). This is 3,193 fewer than the previous month but represents an additional 5,739 bed days from the same period in 2018 which demonstrates a 14% rise in activity. From an acuity perspective, Level 1b (heavily dependent or acutely unwell) patients in non-critical care beds, continues to be the most prevalent acuity score across the Trust which is consistent with the past few years.

Month	Count of bed days						Proportion of bed days				
	Level 0	Level 1a	Level 1b	Level 2	Level 3	Total	level 0	Level 1a	Level 1b	Level 2	Level 3
April 2019	6,930	10,061	26,545	3,409	160	47,104	14.7%	21.4%	56.4%	7.2%	0.3%
March 2019	8,279	10,901	27,792	3,183	143	50,297	16.5%	21.7%	55.3%	6.3%	0.3%

Table 7

The fill rate for registered staff was 96.1% in comparison to an unregistered staff fill rate of 112.3%, with an overall fill rate of 99.5%. There are times when it is appropriate to utilise unregistered staff to support safe staffing in the absence of registered staff. Heads of Nursing, Matrons, Site Nurse Practitioners and Ward Leaders make operational patient safety decisions on a shift by shift basis to ensure all areas are safely staffed.

There is representation from the Chief Nurses' Workforce team at the daily situation report meeting to support all staff resources being effectively utilised across the Trust, to ensure safe staffing and minimise any impact on activity, especially in areas where flex beds are unable to be closed.

The Trust average 'Care hours per patient day' (CHPPD) was 10.9 for the month of April. This figure is reported monthly to NHSI as required and is a national metric based on number of hours of nursing and midwifery care used, divided by the number of patients in beds at 12 midnight for the month.

3.0 EXPECTATION 2 – RIGHT SKILLS

4.1 Mandatory Training, Development and Education

The current compliance with mandatory training across the nursing and midwifery workforce is 85.7%. This has increased from the previous month. Table 8 demonstrates the breakdown of compliance at Directorate level. All establishments have an uplift built in to support staff with undertaking their mandatory training and development whilst maintaining safe levels of staffing.

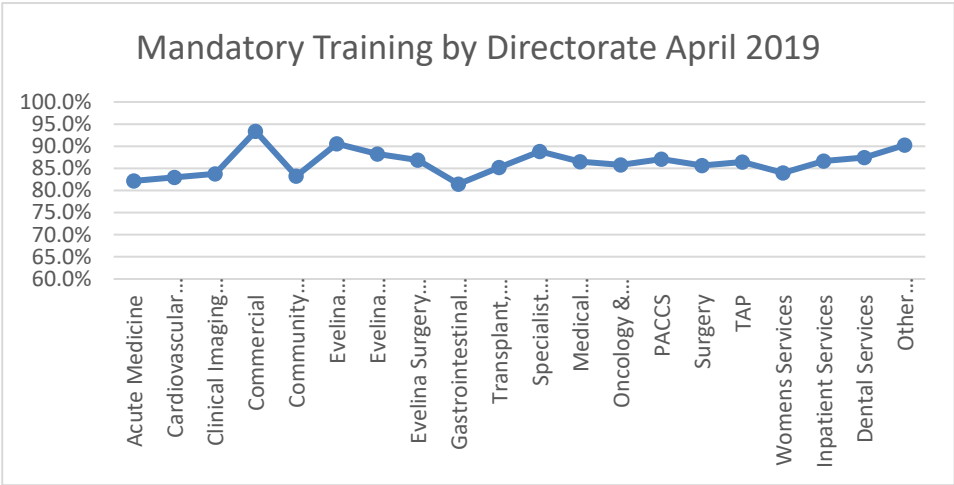


Table 8

The current PDR rate across the nursing and midwifery workforce is 85.0% which is slightly lower than the previous month’s figure. Compliance with completion of PDRs at Directorate level is shown in Table 9. All areas are monitored on their PDR rates through the Directorate Performance Review Meetings (PRM).

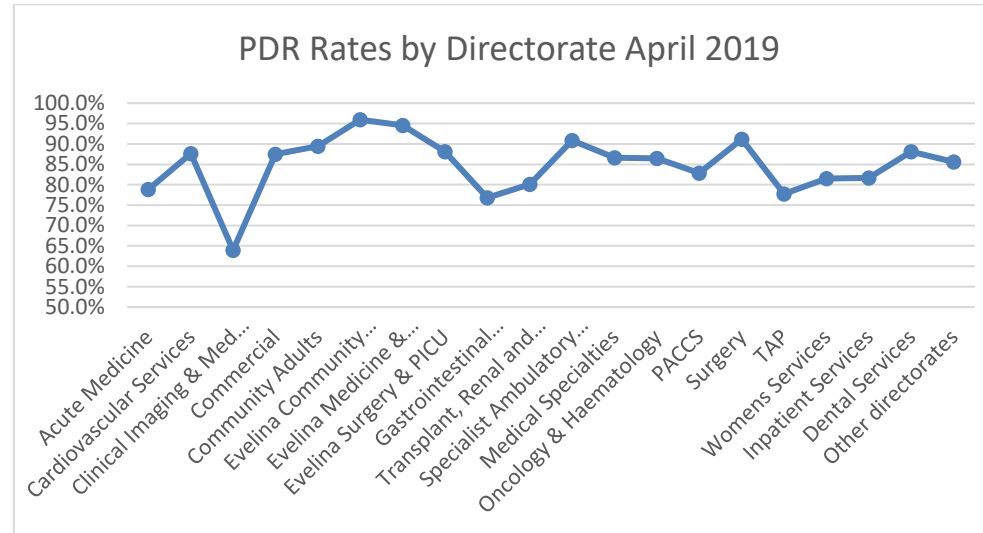


Table 9

4.2 Working as a Multi-professional Team

The organisation is committed to considering new roles and particularly looking at roles which cross traditional professional boundaries. The Trust, in collaboration with London South Bank University (LSBU), South London and Maudsley (SLAM) and Health Education England (HEE), have commenced the Nursing Associate programme, and are continuing to implement the role across adult community areas. Recruitment and on-boarding are continuing for the next cohort to be deployed within acute medicine, cardiovascular and cancer services.

EXPECTATION 3: RIGHT PLACE AND TIME

5.1 Efficient Deployment and Flexibility

With the implementation of Safe Care across all adult and children's inpatient areas in the Trust, there is now visibility of staffing levels, in real time, throughout the organisation. The use of Safe Care Live is now fully embedded in the daily situation report meetings to assess the patient acuity and staffing, twice daily in all areas, at the beginning of the day and night shift. There are some areas who are collecting data 3 times a day due to known variation in activity. The collection of the data highlights and supports decision making alongside professional judgement relating to deployment of temporary staff or the need to move staff to support patient needs in other areas.

Maternity Services continue to use Safe Care for staff check-in and red flag functionality.

In April 2019, 91 red flags were raised by staff highlighting concerns with staffing. Table 10 shows the distribution of red flags and the comparison to March 2019. Staff are encouraged to raise red flags where there may be concerns with safe staffing levels.

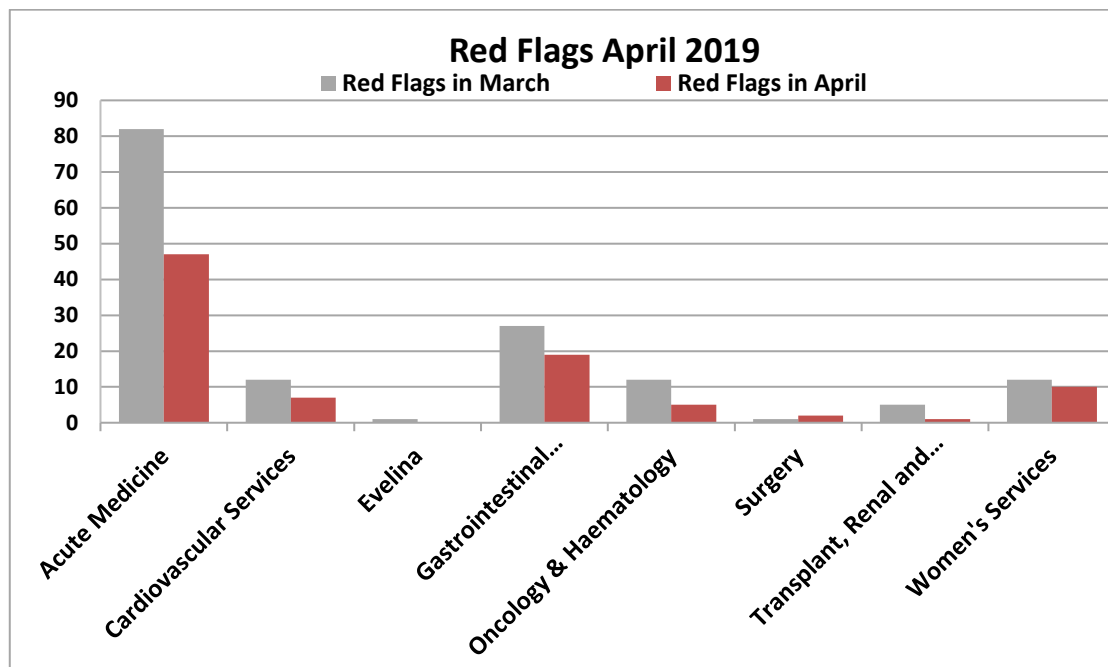


Table 10

5.2 Efficient Employment, Minimising Agency Use

Since January 2018, all Directorates have engaged with roster challenge boards which are designed to improve rostering against agreed KPIs. These are being led by the Chief Nurse Workforce team to ensure that all areas are producing effective, fair, safe and efficient rosters. There has been a significant amount of work undertaken to add new areas and services onto Health Roster and to ensure rosters are properly allocated on Health Roster with recent changes in Directorate structures.

All nursing areas	23rd Apr - 20th May	21st May - 17th Jun	18th Jun - 15th Jul	16th Jul - 12th Aug	13th Aug - 9th Sep	10th Sep - 7th Oct	8th Oct - 4th Nov	5th Nov - 2nd Dec	3rd - 30th Dec	31st Dec - 27th Jan	28th Jan - 24th Feb	25th Feb- 24th Mar	25th Mar- 21st Apr
Planned Hours	573,163	572,317	575,132	581,105	583,312	583,188	588,827	589,675	590,355	600,409	633,300	641,701	639,480
Actual Hours	526,567	525,061	528,982	526,385	519,971	539,042	541,510	551,757	521,209	538,871	576,540	572,925	568,448
Required CHPPD	8.2	8.3	8.2	8.3	8.3	8.3	8.3	8.3	8.3	8.3	8.3	8.0	8.1
Actual CHPPD	8.4	8.4	8.3	8.6	8.5	8.6	8.8	8.9	9.3	9.6	10.1	10.2	11.0
Shifts Without Charge Cover	319	327	495	351	324	322	370	329	429	354	318	525	447
Additional Duties (No of shifts over budget)	4,463	4,330	4,831	4,288	4,620	4,918	5,007	4,972	4,629	5,015	5,100	5,022	5,412
Overall Owed Hours (Net Hours)	118,881	129,691	144,170	131,664	132,081	149,592	115,128	163,134	172,017	158,745	132,208	91,888	97,569
Annual Leave % - Target 11-17%	9.8%	11.7%	11.9%	14.6%	16.1%	11.7%	11.6%	11.2%	13.4%	12.7%	13.9%	16.6%	14.6%
Total Unavailability % - Headroom/uplift Allowance - Target 24%	22.2%	24.1%	24.8%	26.4%	28.7%	25.9%	26.0%	24.7%	26.3%	25.6%	26.2%	28.0%	27.0%
Roster Approval (Full) Lead Time Days - Target 42 days	20	22	23	23	24	31	24	34	38	65	48	40	42

Table 11

Table 11 demonstrates the main KPIs and other key metrics relating to the efficient deployment of staff at Trust level for rosters covering the last year. Significant work is ongoing to improve a number of these metrics with a key focus on improving the timing of roster

publication, recording of 'in charge' shifts and continued reduction in the number of hours owed whilst maintaining a close scrutiny on annual leave management. All of these are being addressed through the monthly challenge boards.

Having efficient rosters supports the measures taken to reduce agency spend across rostered areas. The agency spend (which represents invoices paid in month) in April 2019 was 3.6% of the total nursing staff pay bill (Table 12). Work is ongoing to help address the provision of enhanced care across the Trust particularly in relation to the care of patients with mental health needs.

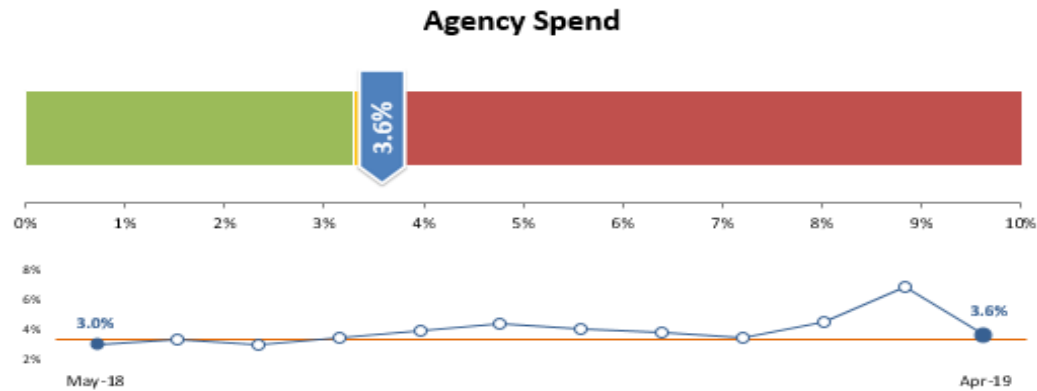


Table 12

Table 13 highlights the actual usage of temporary staffing in April 2019 in comparison to each month in the preceding year. This is broken down into Bank and Agency WTE.

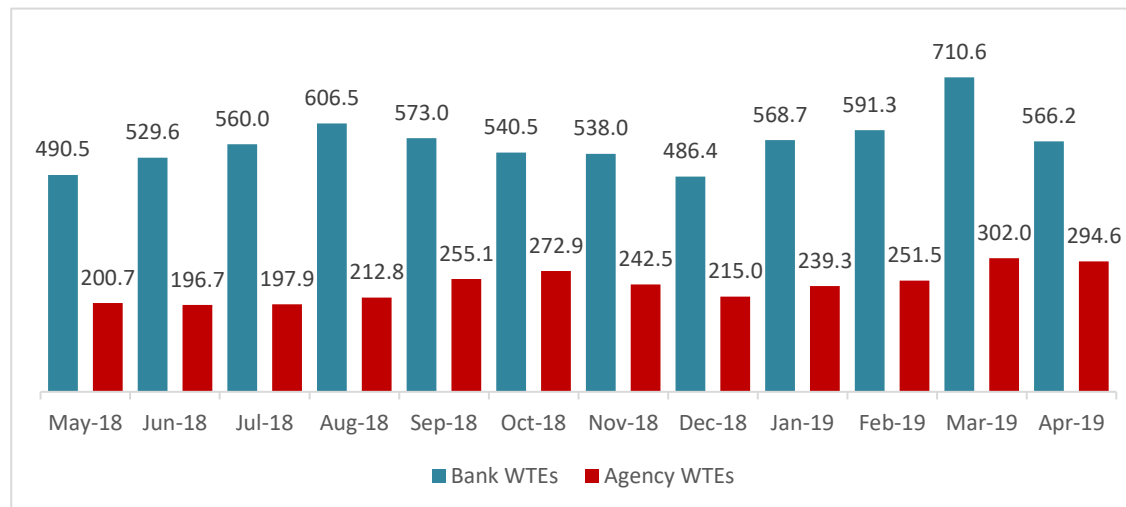


Table 13

Table 14 outlines the total temporary staffing usage, including the reasons for usage. As noted above, there continues to be usage of temporary staff to support the enhanced care of patients, notably the ongoing use of RMNs.

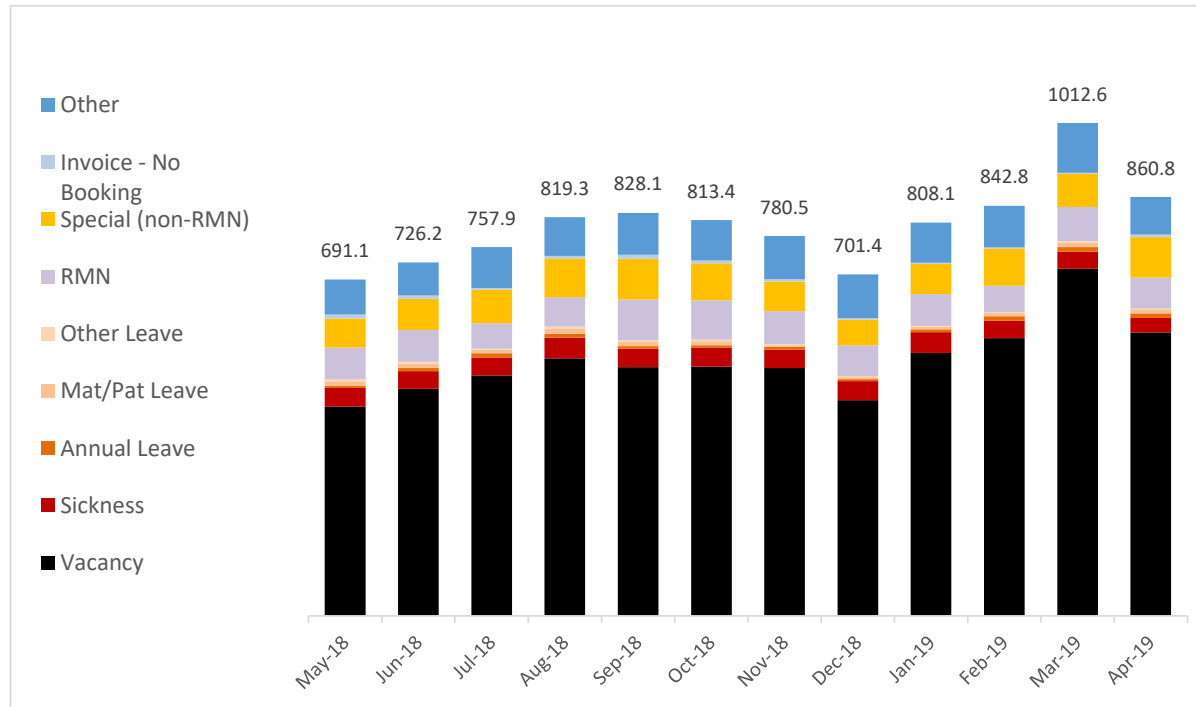


Table 14

6.0 Request to the Board of Directors

The Board of Directors are asked to note the information contained in this briefing, including the use of the red flag system to highlight concerns with safe staffing, the continued focus on recruitment and retention, the reporting of the roster KPIs and the continuation and expansion of the Nursing Associate programme at Guy's and St Thomas'.