

GUY'S AND ST THOMAS' NHS FOUNDATION TRUST
QUALITY AND PERFORMANCE BOARD COMMITTEE
WEDNESDAY 08 SEPTEMBER 2021

Title:	Monthly Board Briefing of Nursing and Midwifery Staffing Levels for July 2021 (April data)
Responsible Director:	Avey Bhatia, Chief Nursing Officer
Contact:	Jay Dungeni, Deputy Chief Nurse
Purpose:	To assure the Board and the public regarding Nursing and Midwifery safe staffing levels
Strategic priority reference:	TO TREAT AS MANY PATIENTS AS WE CAN, SAFELY
Key Issues Summary:	<ul style="list-style-type: none"> • The nursing and midwifery vacancy rate is still above the Trust target of <10% mainly due to challenges associated with the COVID-19 pandemic. Significant progress has been made to close the gap using local and international recruitment drives which will mature with the easing of national restrictions. • PDR compliance is below the Trust target of 95% as was affected by the significant operational changes in response the COVID-19 pandemic. A key part of the approach to addressing this is to ensure that the education, training and development of our staff is relevant to the current climate.
Recommendations:	<p>The COMMITTEE is asked to:</p> <ol style="list-style-type: none"> 1. Note the content of the paper

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NURSING AND MIDWIFERY SAFE STAFFING LEVELS

AVEY BHATIA

1 Introduction

- 1.1 This briefing provides the Trust Board with an overview of the Nursing and Midwifery workforce during 2021 and is set out in line with the National Quality Board (NQB) Standards and Expectations for Safe Staffing published in 2016.
- 1.2 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 Key highlights

- 2.1 Table 1 outlines the key performance workforce indicators for Nursing and Midwifery mapped against the Trust target with comparison to the previous month's performance.

Key Performance Indicator	Target	March 2021 Performance	April 2021 Performance	Context and actions
Vacancy rate	10%	13.4%	12.6%	The staff in post increased by 20.77 whole time equivalent (WTE) in month and the budgeted Nursing and Midwifery establishment decreased by 49.16 WTE in month. If the current external applicants were added to the staff in post figure, the overall vacancy rate would be 6.2%. The

				Recruitment Team are working on reducing this with the individual Directorates concerned.
Agency spend	3.3%	4.0%	2.6%	Measures are in place to monitor and reduce agency spend within the individual Directorates and through the Workforce Team recruitment and retention initiatives.
Annual turnover	12.0%	13.2%	13.2%	This is above the Trust target with ongoing work from the Retention Team to reduce this. The monthly turnover rate decreased in month by 0.2% from 1.1% to 0.9%.
Sickness rate	3.0%	5.5%	5.1%	This remains above the Trust target and is addressed within the individual Directorates and monitored through monthly directorate Performance Review Meetings.
Personal Development Review (PDR)	95%	77.3%	78.6%	Completion of PDRs were affected by the significant staff deployment required to support Trust's response the COVID-19 pandemic. Directorate plans have been formulated to address this and improvement is noted.
Mandatory training	95%	90.5%	90.5%	This is below the Trust target with Directorate plans formulated to improve compliance.

Table 1

3 COVID-19

3.1 As outlined previously, the Trust received the first COVID-19 patient in February 2020, signalling the start of 'wave one', and the Trust moved into a stabilisation and recovery phase in June 2020. In November 2020 the Trust saw a rise in the number of COVID-19 cases, signalling the start of 'wave two'. In February 2021 COVID-19 cases started to decrease and the Trust started to move into a second stabilisation and recovery phase. The Trust continued to see a decrease in the number of COVID-19 cases during April 2021 with 8 COVID-19 positive cases on 30 April 2021 (inpatient wards n=0 and Critical Care n=8) in comparison to 28 COVID-19 positive cases on 31 March 2021. This report is a summary of the key implications for the Nursing and Midwifery workforce and tactical actions.

3.2 Operational Changes Impacting the Workforce

- Voluntary asymptomatic COVID-19 testing for all frontline staff continued throughout April 2021.

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- The COVID-19 vaccination programme continued with 6 vaccination pods open across the St Thomas' and Guy's sites.
- Redeployment of Nursing and Midwifery staff back to home units completed in April 2021 aligning with Trust operational changes and increases in elective activity.

3.3 Critical Care Capacity and Workforce

- 3.3.1 As previously reported, the Trust increased its Critical Care capacity which reached its peak during January 2021 and declined over the months of February and March 2021 with Critical Care nurse:patient ratio returning to 1:1 for Intensive Care patients.

All remaining deployed nurses within Critical Care returned to their home units during April 2021. The return to pre-COVID bed capacity of 101 enabled the Critical Care teams to commence reflective and debrief sessions for all staff.

3.4 Tactical Workforce Structure

- 3.4.1 The Nursing and Midwifery Tactical Staffing and the Tactical Staffing Workforce Hub continued to meet weekly. The work focused on rest and reflective/debrief sessions for all staff. Nursing and Midwifery Safe Staffing meetings led by the Head of Nursing for Workforce continued throughout April 2021 decreasing to twice weekly in frequency becoming business as usual. These meetings ensured the use of resources was safe and efficient across the Trust.

4 EXPECTATION 1 – RIGHT SKILLS

4.1 Evidence Based Workforce Planning

- 4.1.1 In order to ensure the safe and effective delivery of patient care, it is essential that we have the right establishment and the right staff in post. Table 2 sets out the current overall Nursing and Midwifery workforce metrics in comparison to April 2020, figure 1 identifies the growth in establishment (0.46%) compared to the growth of staff in post (1.02%) and figure 2 sets out the growth of staff in post. The percentage of actual hours used against planned hours increased by 26.2% in comparison to April 2020. This reflects an increase in activity as the number of COVID-19 cases reduced and the Trust moved into a second stabilisation and recovery phase.

Staffing measures	April 2020	April 2021	Difference	Change
Nursing Establishment WTE	7155.53	7188.78	33.25	▲
Nursing Staff in Post WTE	6221.64	6285.27	63.63	▲
Vacancies WTE	933.89	903.51	-30.38	▼
Vacancy rate	13.1%	12.6%	-0.5%	▼
Annual turnover	13.1%	13.2%	0.1%	▲
Red Flags raised	6	48	42.00	▲
Agency % of Pay bill	3.9%	2.6%	-1.3%	▼
Actual v Planned Hrs used	50.7%	76.9%	26.2%	▲

Table 2

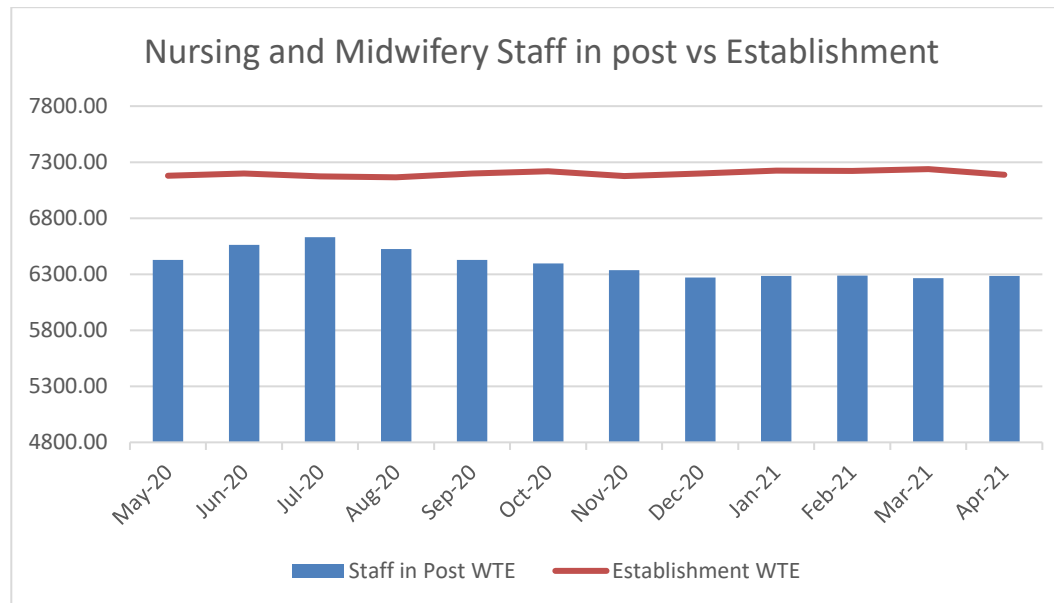


Figure 1

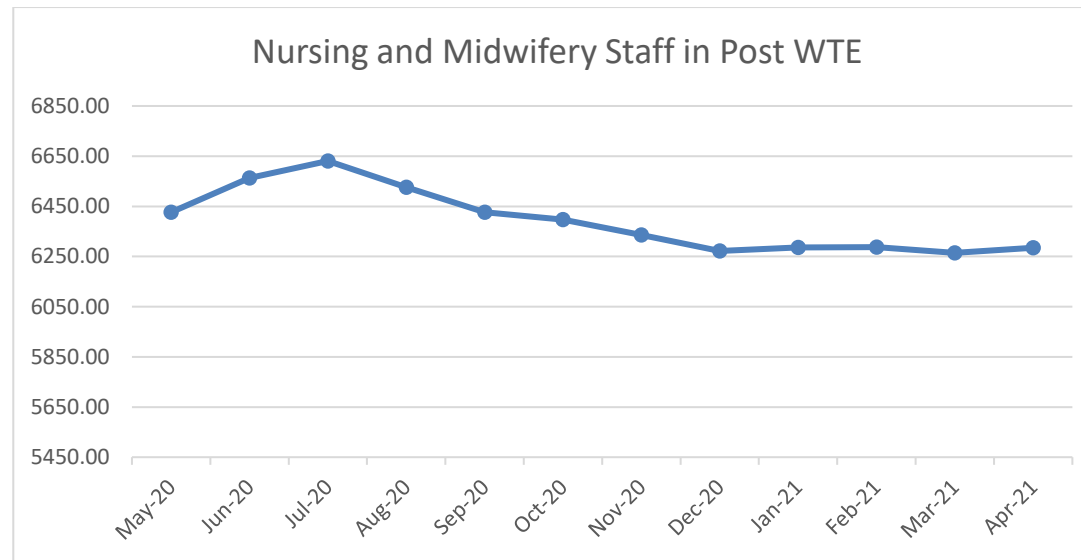


Figure 2

4.2 Recruitment and Retention

- 4.2.1 Figures 3, 4 and 5 display the trends in three key Nursing and Midwifery workforce metrics, namely vacancy, turnover and sickness.
- 4.2.2 Recruitment continued via various online platforms; WhatsApp, Skype and Microsoft Teams, focusing on difficult to recruit to areas. The Trust International Recruitment campaign continued throughout April 2021 with a total of 22 International Nurses commencing within the Trust by 30 April 2021 across Theatres Anaesthetics and Perioperative Directorate (n= 14), Evelina London Children’s Hospital Theatres (n= 4) and General Adult Nursing (n= 3). Further nurses are planned to arrive in May (n=5) and June (n=4).

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- 4.2.3 Recruitment for final year nursing student qualifying in September 2021 continued with 234 students offered newly qualified nurse positions within the Trust (non-host students n = 81, host students n =153). Retention activities were maintained throughout April 2021 with a focus on career development and wellbeing. Career and Wellbeing trolley visits became a focus, reaching out to staff in clinical areas.
- 4.2.4 The current sickness absence rate was 5.1% in April 2021, a reduction of 0.4% since March 2021. Commercial and Clinical Imaging & Med Physics recorded highest sickness absence rate of 7.7% and 7.5% respectively. These Directorates have small Nursing establishments (n=24.0 WTE and 80.3 WTE respectively) in comparison to other Directorates thereby resulting in higher reported percentage rates.
- 4.2.5 COVID-19 related absence has further declined during April 2021. By 30 April 2021 a total of 29 Nurses and Midwives were off due to: shielding, not working from home (n=3), shielding, working from home (n=9), staff experiencing COVID-19 symptoms (n=11), self-isolation, not working from home (n=1), self-isolation, working from home (n=5), carers leave (n=0).

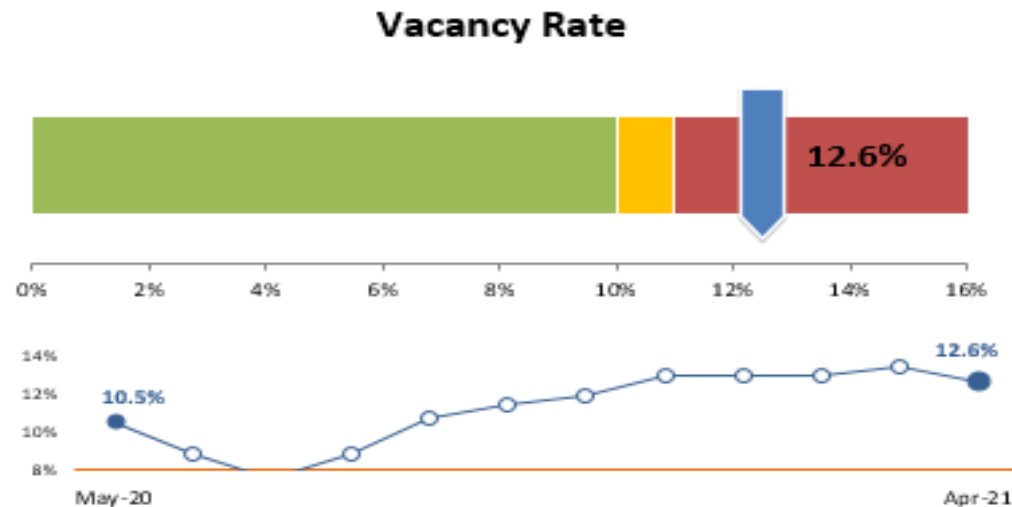


Figure 3

Annual Turnover (voluntary leaving reasons only) May 20 - Apr 21

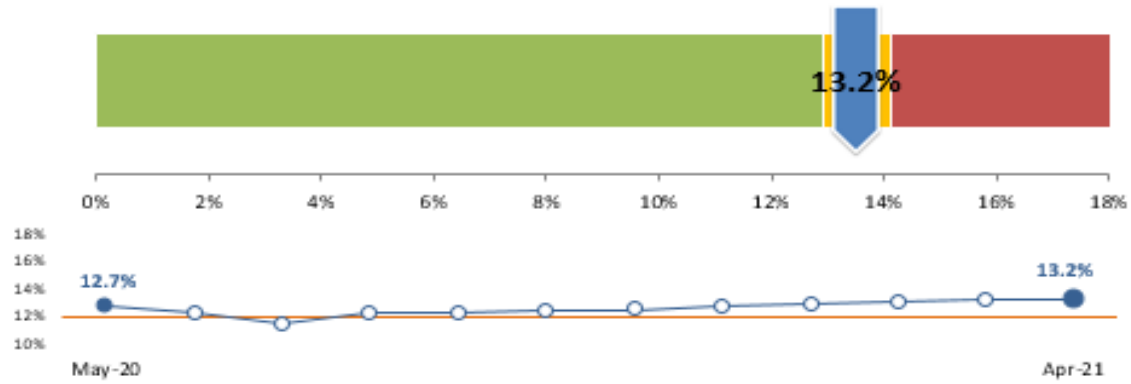


Figure 4

Sickness Absence Rate

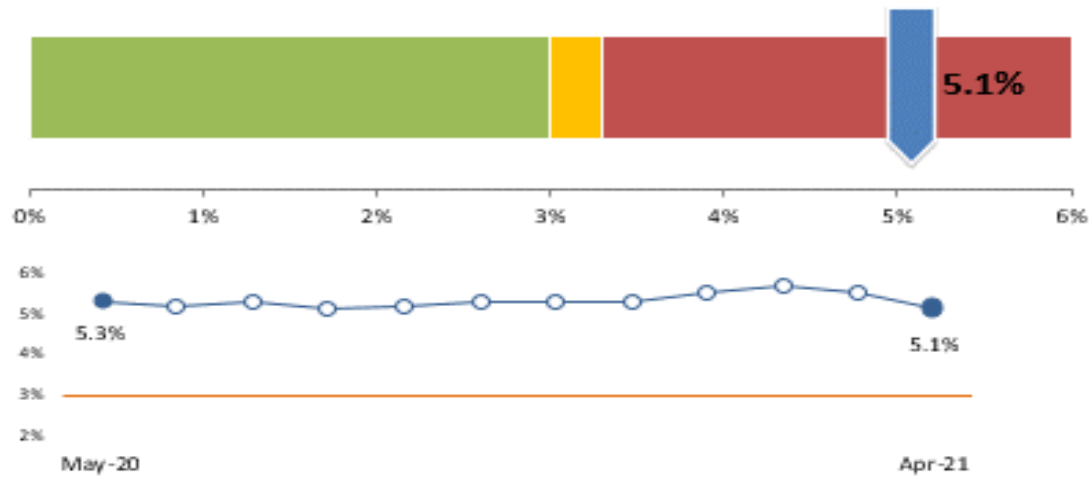


Figure 5

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4.3 Activity and Acuity

4.3.1 The number of bed days in April 2021 stood at 35,669 (table 3). This is 2,003 more than the previous month, representing an increase of 12,802 bed days from the same period in 2020 and a reduction of 11,435 bed days when compared to April 2019. The data articulates the changes in activity as the Trust has responded to the pandemic since March 2020. 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.

	Count of bed days						Proportion of bed days				
	Level 0	Level 1a	Level 1b	Level 2	Level 3	Grand Total	Level 0	Level 1a	Level 1b	Level 2	Level 3
April 2021	5,575	9,347	19,170	1,425	152	35,669	15.6%	26.2%	53.7%	4.0%	0.4%
March 2021	4,325	8,933	18,812	1,465	131	33,666	12.8%	26.5%	55.9%	4.4%	0.4%

Table 3

4.3.2 The average fill rate for registered staff was 72.7% in comparison to an unregistered staff average fill rate of 95.9%, with an overall fill rate of 84.3%. As outlined in Section 4.1, this reflects an increase in activity as the number of COVID-19 cases reduced in April 2021. The fill rates are not representative of staffing levels. These are anticipated to normalise as the Trust moves into the stabilisation phase.

4.3.3 The Trust average 'Care hours per patient day' (CHPPD) was 12.1 for the month of April 2021. This figure is reported monthly to NHSI as required and is a national metric based on the number of hours of Nursing and Midwifery care used, divided by the number of patients in beds at 12 midnight for the month. The peer (Shelford Group) average, benchmarked on Model Hospital was 10.1 in March 2021.

5 EXPECTATION 2 – RIGHT SKILLS

5.1 Mandatory Training, Development and Education

The current compliance with mandatory training across the Nursing and Midwifery workforce is 90.5%. This is same as previous month and 0.8% decrease when compared to April 2020. Figure 6 demonstrates the breakdown of Directorate compliance. All establishments have an uplift built in, to support staff with undertaking their mandatory training and

development whilst maintaining safe staffing levels.

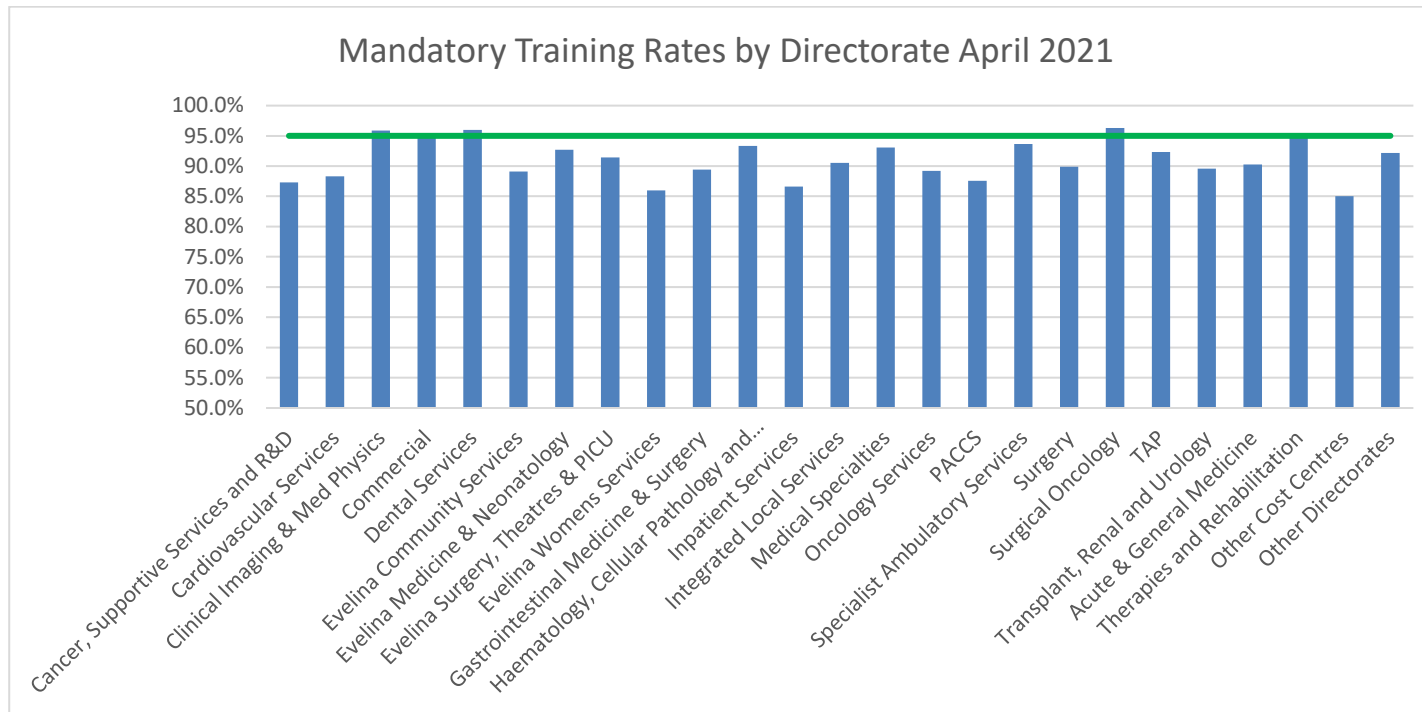


Figure 6

5.1.1 The current PDR rate across the Nursing and Midwifery workforce is 78.6%, an increase of 1.3% from previous month and 8.8% lower than same period in 2020. Completion of PDRs was affected by the significant staff deployment required to support Trust’s response the COVID-19 pandemic. Directorate plans have been formulated to address this. Figure 7 demonstrates the breakdown of PDR compliance by Directorate.

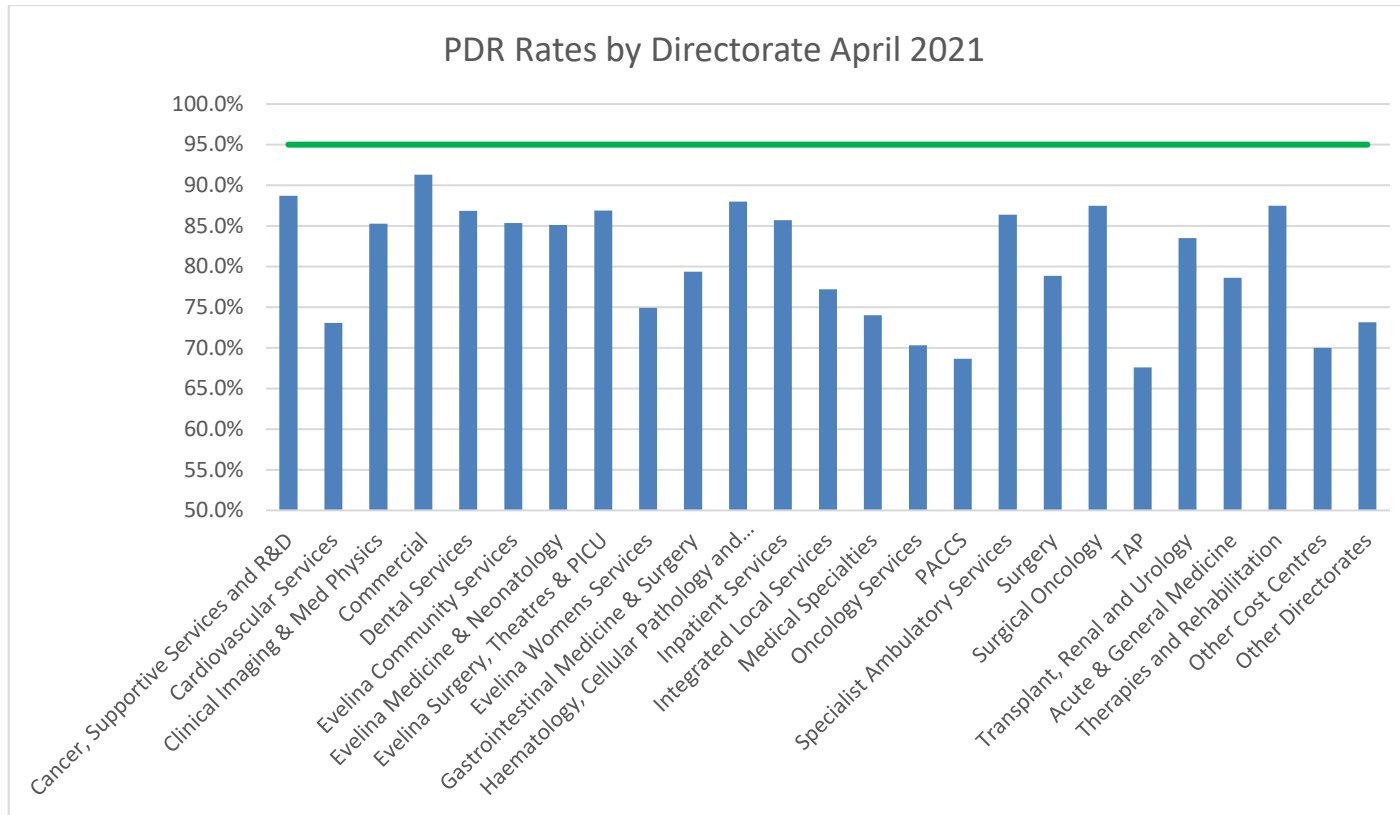


Figure 7

6 EXPECTATION 3: RIGHT PLACE AND TIME

6.1 Efficient Deployment and Flexibility

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- 6.1.1 Safe Care across all adult and children inpatient areas supports the real time visibility of staffing levels across the Trust. The collection of the data highlights and supports decision making relating to the deployment of temporary staff or the need to move staff to support patient needs in other areas.
- 6.1.2 In April 2021, 48 red flags were raised, which is a decrease of 29 compared to the previous month. Figure 8 shows the distribution of red flags and the comparison to March 2021 (77 Red flags in March 2021, 48 Red flags in April 2021). Of all the raised red flags, 4 have remained open with no evident cause for them to remain open and was addressed with the individual teams. Staff are encouraged to raise red flags where there may be concerns relating to safe staffing levels, which triggers a review by the Senior Sister/Matron or Head of Nursing to resolve any immediate staffing concerns.

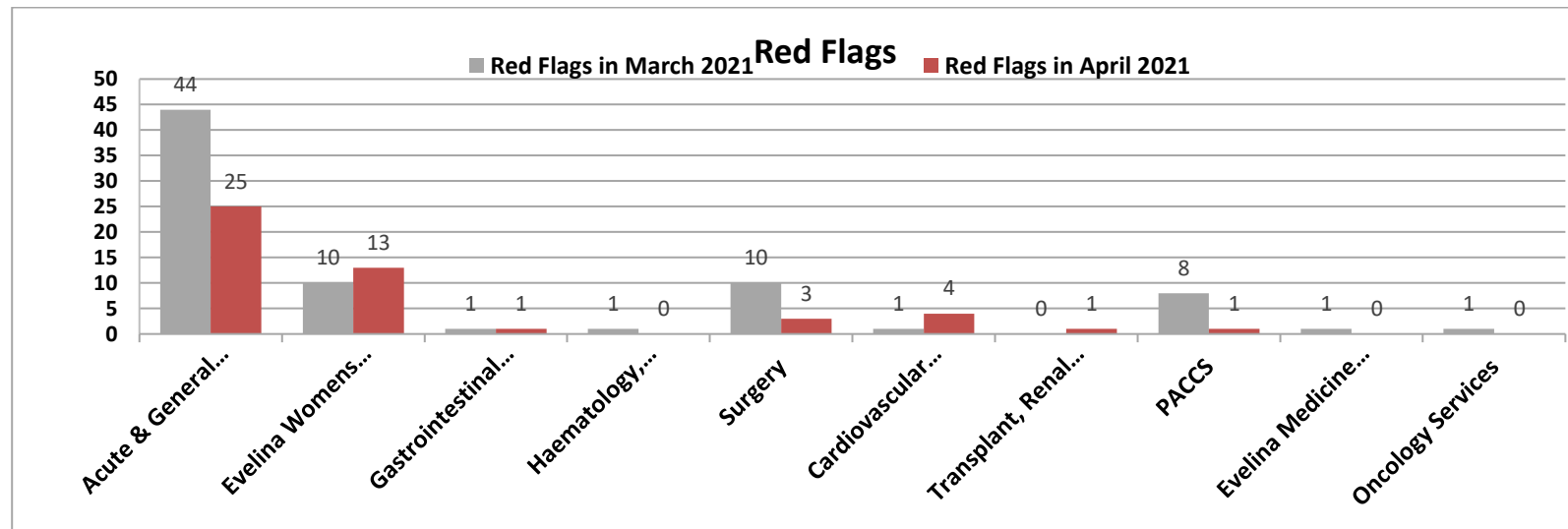


Figure 8

6.2 Efficient Employment, Minimising Agency Use

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6.2.1 Planned roster reviews continue to take place to support individual Directorates as required. Performance continues to be addressed with the individual areas who have not met the Key Performance Indicators (KPI). Challenge Boards and Annual Roster Reviews have continued with all Directorates booked for review over a rolling 12 month period providing a systematic approach to appraise rosters and provide guidance and support in maintaining a fair, safe and cost-effective roster.

All nursing areas	20th Apr - 17th May	18th May - 14th June	15th June - 12th July	13th July - 9th August	10th August - 6th September	7th September - 4th October	5th October - 1st November 2020	2nd November - 29th November	30th November - 27th December	28th December 2020 to 24th January 2021	25th January 2021 to 21st February 2021	22nd February 2020 to 21st March 2021	22nd March to 18th April 2021
Planned Hours	1,087,519	1,070,995	813,986	806,897	841,754	809,983	838,153	819,568	814,132	882,632	892,589	914,674	838,966
Actual Hours	602,438	592,722	618,671	620,161	614,810	618,340	640,900	646,773	603,583	567,300	602,701	601,078	587,125
Actual CHPPD	10.5	10.7	11.5	11.1	11.0	10.5	12.3	13.2	13.6	12.0	12.4	12.5	12.9
Required CHPPD	4.9	5.2	5.6	6.3	6.8	7.1	7.6	7.8	7.8	7.0	6.7	7.0	7.2
Additional Duties (No of shifts over budget)	6,020	4,997	5,903	5,000	4,869	4,905	5,036	5,037	5,147	4,602	4,768	4,305	4,265
Overall Owed Hours (Net Hours)	613,122	372,469	324,952	281,501	294,997	276,596	289,321	297,961	275,256	404,227	428,799	322,689	249,586
Annual Leave % - Target 11-17%	7.8%	10.8%	9.4%	12.8%	17.1%	12.5%	12.2%	10.6%	14.8%	16.4%	13.3%	16.4%	18.6%
Total Unavailability % - Headroom/uplift Allowance - Target 24%	25.2%	24.0%	22.4%	24.8%	28.5%	25.2%	24.8%	23.8%	27.6%	33.4%	28.0%	29.5%	31.1%
Roster Approval (Full) Lead Time	33	26	29	29	31	32	34	36	33	37	34	31	32

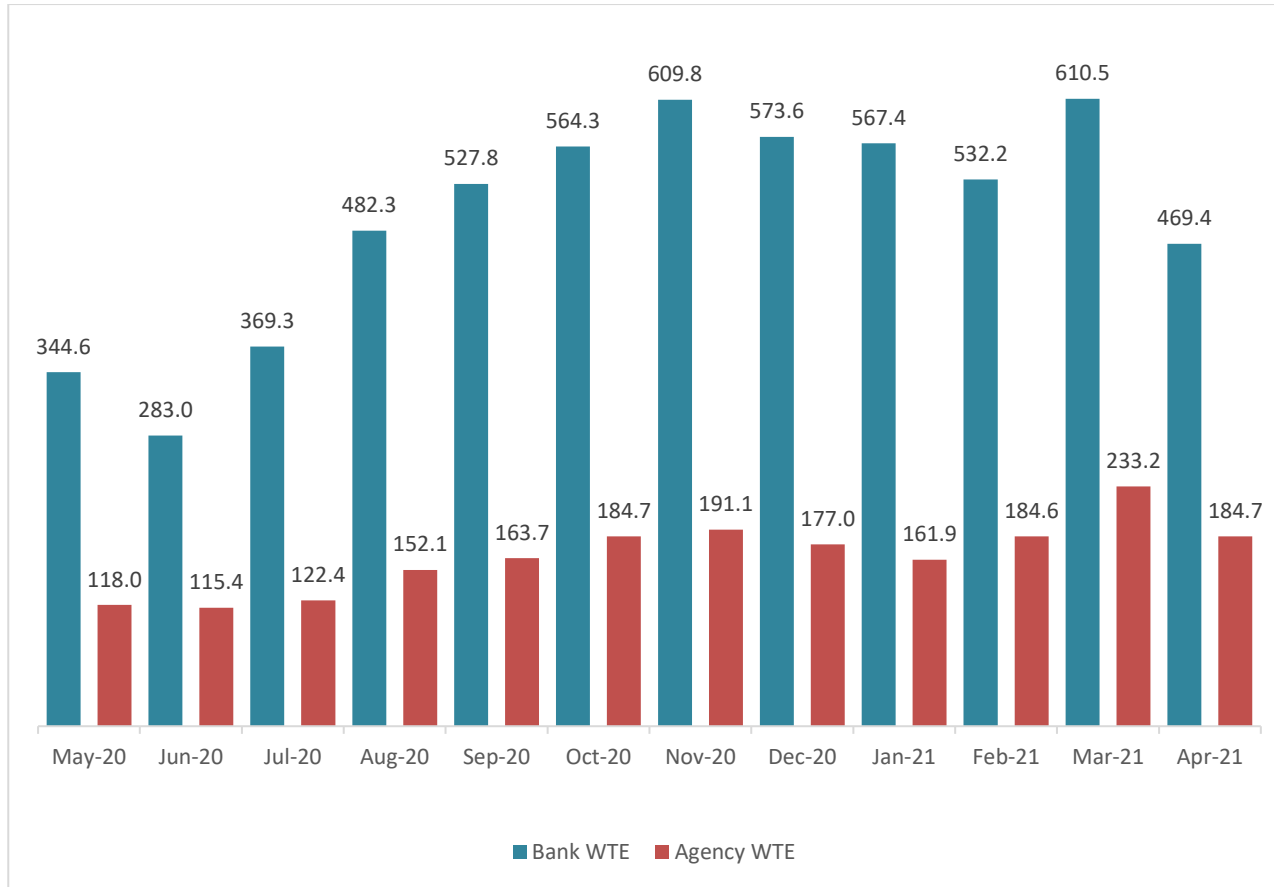


Figure 10 - Actual usage of temporary staffing

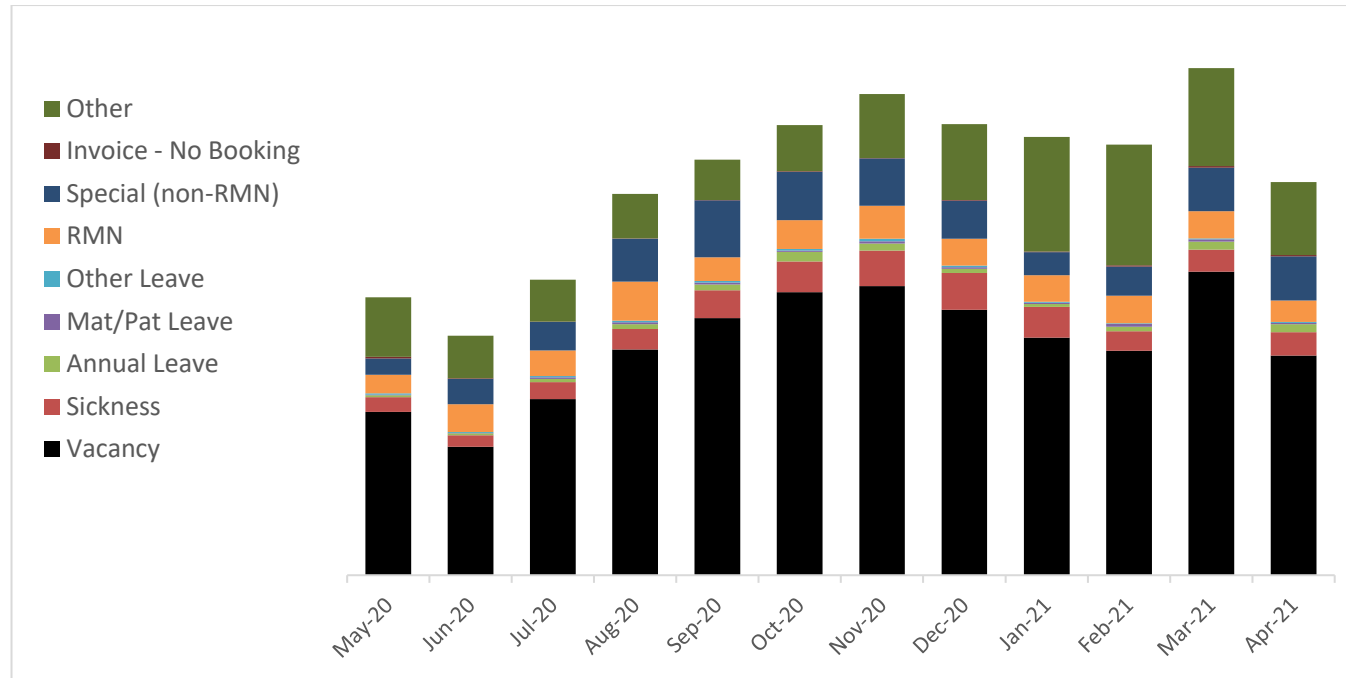


Figure 11 - Temporary staffing usage, including the reasons

7 Request to the Board of Directors

7.1 The Board of Directors are asked to note the information contained in this briefing for April 2021. This includes the Nursing and Midwifery workforce response to COVID-19.