

Cheshire and Wirral Partnership



NHS Foundation Trust

STANDARDISED REPORT COMMUNICATION

REPORT DETAILS

Report subject: Ward Daily Staffing Levels July and August 2015							
Agenda ref. no:	15/16/68						
Report to (meeting):	Board of Directors						
Action required:	Information and noting						
Date of meeting:	30/09/2015						
Presented by:	Stephen Scorer, Director of Nursing, Therapies and Patient Partnership						

Deliver high quality, integrated and innovative services that improve outcomes	Vaa				
	Yes				
Ensure meaningful involvement of service users, carers, staff and the wider community	No				
Be a model employer and have a caring, competent and motivated workforce	Yes				
Maintain and develop robust partnerships with existing and potential new stakeholders	No				
Improve quality of information to improve service delivery, evaluation and planning	Yes				
Sustain financial viability and deliver value for money	Yes				
Be recognised as an open, progressive organisation that is about care, well-being and partnership	Yes				
Which CQC quality of service domains this report reflects:					
Safe services	Yes				
Effective services	Yes				
Caring services	Yes				
Well-led services	Yes				
Services that are responsive to people's needs	Yes				
Which Monitor quality governance framework/ well-led domains this report refl	ects:				
Strategy	No				
Capability and culture	Yes				
Process and structures	Yes				
Measurement	Yes				
Does this report provide any information to update any current strategic risks?	If so, which?				
See current risk register in the agenda of the public meeting of the Board of Directors	No				
at http://www.cwp.nhs.uk/about-us/board-members/our-board-meetings	NO				
35T					
Does this report indicate any new strategic risks? If so, describe and indicate	risk score:				
See current integrated governance strategy: CWP policies – policy code FR1 No					
35T					

REPORT BRIEFING

Situation – a concise statement of the purpose of this report

This report details the ward daily staffing levels during the month of July and August 2015. The planned and actual hours for registered nurses (RN) and clinical support workers (CSWs) for July and August 2015 have been submitted to UNIFY using the template supplied by NHS England (appendix 2 and 3). The themes arising within these monthly submissions continue to mirror those that have arisen previously. These themes identify how patient safety is being maintained on a shift by shift basis. The work of the ward staffing project group has been transferred to the newly formed People Planning Group to take forward the recommendations from the initial review relating to staffing levels and continuous improvement measures. The Director of Nursing is taking forward planning on how to meet the additional requirement of reporting on Contact Time twice yearly.

Background – *contextual and background information pertinent to the situation/ purpose of the report* The monthly reporting of daily staffing levels is a requirement of NHS England and the National Quality Board in order to appraise the Board and the public of staffing levels within in-patient units. CWP undertook a comprehensive review of ward staffing levels between Oct and Dec 2013 with 6 monthly follow up reviews in May 2014, December 2014 and May 2015. The Board of Directors, in line with the NQB requirements, will continue to receive monthly reports on Ward Daily Staffing Levels and also reports on the six monthly ward staffing reviews that the trust are required to undertake. NB. The June UNIFY figures reported in the July 2015 report were incorrect however the accompanying analysis was correct. The correct data had been sent to UNIFY and an amended

version has now been posted on the external website (Appendix 1)

Assessment – analysis and considerations of options and risks

During July 2015 patient safety on in-patient wards was maintained by nurses working additional unplanned hours, cross covering across wards, the multi-disciplinary team and ward manager supporting nursing staff in the delivery of planned care and patient care being prioritised over nondirect care activities. These themes have been quantified from Feb-May 2015 and analysed as part of the 6 monthly review report submitted to the Board of Directors in July 2015.

Recommendation – what action/ recommendation is needed, what needs to happen and by when?

The Board of Directors are recommended to note the report.

Who/ which g above meetin	roup has approved this report for receipt at the g?	Stephen Scorer, Director of Nursing, Therapies and Patient Partnership			
Contributing	authors:	Maria Nelligan, Deputy Director of Nursing			
Distribution to	o other people/ groups/ meetings:				
Version	Name/ group/ meeting	Date issued			
35T	35T	35T			

Appendices provided for reference and to give supporting/ contextual information:									
Provide only <u>necessary</u> detail, do <u>not</u> embed appendices, provide as separate reports									
Appendix no.	Appendix title								
1	Ward Daily Staffing Board Report (June data)								
	Ward Daily Staffing Board Report (July data)								
	Ward Daily Staffing Board Report (Aug data)								
3	, , , , , , , , , , , , , , , , , , , ,								

Appendix 2 Sep 2015 Ward Daily Staffing Board Report (July data)

		Day					Night			Fill Rate				
		Registered Care Staff		Registered Care Staff		Day Night			ht]				
	Ward		Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Average fill rate - registered nurses (%)		Average fill rate - registered nurses (%)	Average fill rate - care staff (%)	To maintain safe staffing levels the following actions were taken:
	Adelphi	1666.5	1557.5	1010.5	713	759	701.5	1242	1095.5	93.5%	70.6%	92.4%	88.2%	Nursing staff worked additonal unplanned hours
	Alderley Unit	874.5	894.5	1420.5	1269.5	690	609.5	713	713	102.3%	89.4%	88.3%	100.0%	Skill mix was altered, nursing staff cross covered wards and non direct patient care activities were cancelled
	Bollin	1138.5	1111.5	1587	1497	736	609.5	1322.5	1161.5	97.6%	94.3%	82.8%	87.8%	Nursing staff worked additonal unplanned hours
	CARS	1081	1028	1253.5	1201.5	713	614	724.5	700.5	95.1%	95.9%	86.1%	96.7%	Nursing staff worked additonal unplanned hours and nursing staff cross covered wards
East	Croft	1147.75	940.15	1974	1738.75	793.5	744	1759	1632	81.9%	88.1%	93.8%	92.8%	Nursing staff worked additonal hours, nursing staff cross covered wards and non direct patient care activities were cancelled
	Greenways A&T	1278.5	1140.5	1467.5	1527	713	655.5	425.5	471.5	89.2%	104.1%	91.9%	110.8%	Skill mix was altered
	LimeWalk Rehab	1090.5	1061	1258	1185	702	657.5	738	730.5	97.3%	94.2%	93.7%	99.0%	Skill mix was altered, nursing staff worked additional unplanned hours and cross covered wards
	Saddlebridge	893	689	1426	1524.5	713	494.5	713	943	77.2%	106.9%	69.4%	132.3%	Nursing staff worked additional unplanned hours, the WM worked within the clinical team, the MDT supported the nursing team and skill mix was altered
	Brackendale	914	914	1121.5	1087.023	713	701.5	724.5	736	100.0%	96.9%	98.4%	101.6%	*
	Lakefield	1169.5	1001	1081	1012	713	678.5	720	766	85.6%	93.6%	95.2%	106.4%	Nursing staff worked additonal unplanned hours
م	Meadowbank	1245	1189	2102	2052.5	713	650	1610	1621.5	95.5%	97.6%	91.2%	100.7%	Nursing staff worked additonal unplanned hours and skill mix was altered
	Oaktrees	1222.5	1209.75	1312	1289	713	701.5	534.5	551.5	99.0%	98.2%	98.4%	103.2%	*
Wirral	Brooklands	1051	1042	1271.5	1264	724.5	713	922	841.5	99.1%	99.4%	98.4%	91.3%	Nursing staff worked additonal unplanned hours and skill mix was altered
	Beech	1274.5	1181.5	972.5	946.5	608	585	608	608	92.7%	97.3%	96.2%	100.0%	Nursing staff worked additional unplanned hours, skill mix was altered and non direct patient care activities were cancelled
	Cherry	1334	1212	1161.5	911.5	770.5	678.5	1115.5	1000.5	90.9%	78.5%	88.1%	89.7%	The WM worked within the clinical team, skill mix was altered and non direct patient care activities were cancelled
	Eastway A&T	1223.5	1173.5	1273.5	1270.5	667	638	1121	1128	95.9%	99.8%	95.7%	100.6%	*
West	Juniper	1502	1444.5	1012	828	690	621	747.5	736	96.2%	81.8%	90.0%	98.5%	Nursing staff worked additonal unplanned hours and skill mix was altered
\geq	Maple Ward	1205.5	965	1360.5	1251.5	642	676.5	726	787	80.0%	92.0%	105.4%	108.4%	The WM worked within the clinical team and 2 patient activities were cancelled
	Pine Lodge (YPC)	1160.7	942.9	966	1053	667	552	747.5	793.5	81.2%	109.0%	82.8%	106.2%	Nursing staff worked additional unplanned hours, the WM worked within the clinical team, the MDT supported the nursing team and nursing staff cross covered wards
	Rosewood	1292	1177	1565.5	1450.5	621	586.5	790.5	744.5	91.1%	92.7%	94.4%	94.2%	Nursing staff worked additonal unplanned hours and cross covered wards
	Willow PICU	997	993	1111	959	724.5	667	805	782	99.6%	86.3%	92.1%	97.1%	Nursing staff worked additonal unplanned hours
Trustwide	e	24761.45	22867	27708	26031	14786	13535	18810	18544	92.4%	94.0%	91.5%	98.6%	* all categories above 95%