

**STANDARDISED SBAR COMMUNICATION**

REPORT DETAILS	
<b>Report subject:</b>	Ward Daily Staffing Levels November and December 2019
<b>Agenda ref. number:</b>	19.20.130
<b>Report to (meeting):</b>	Board of Directors
<b>Action required:</b>	Information and noting
<b>Date of meeting:</b>	29/01/2020
<b>Presented by:</b>	Gary Flockhart, Director of Nursing, Therapies and Patient Experience

Which strategic objectives this report provides information about:	
Deliver high quality, integrated and innovative services that improve outcomes	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 NHSI Single Oversight Framework themes this report reflects:		CWP Quality Framework:		
Quality	Yes	Patient Safety	Safe	Yes
Finance and use of resources	Yes	Clinical Effectiveness	Effective	Yes
Operational performance	Yes		Affordable	Yes
Strategic change	No		Sustainable	Yes
Leadership and improvement capability	Yes	Patient Experience	Acceptable	Yes
			Accessible	Yes

<http://www.cwp.nhs.uk/media/4142/quality-improvement-strategy-2018.pdf>

Does this report provide any information to update any current strategic risks? If so, which?	
Contact the corporate affairs teams for the most current strategic risk register.	No

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

**REPORT BRIEFING**

Situation – a concise statement of the purpose of this report
This report details the ward daily staffing levels during the months of November and December 2019 following the submission of the planned and actual hours of both registered nurses (RN) and clinical support workers (CSWs) to UNIFY (appendix 1 and 2). 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.

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.

The recommendations made within the latest six monthly report are being followed through and will be monitored via the People Planning group which oversees the strategic approach to safe staffing. The Trust is engaged in the Mental Health National Optimum Staffing Project a programme of work commissioned by Health Education England to develop a generic tool (multi-disciplinary) for Safe Staffing that can be used in any service setting for inpatient mental health services.

### Assessment – analysis and considerations of the options and risks

During November 2019 the trust achieved staffing levels of 96.6% for registered nurses and 99% for clinical support workers on day shifts and 98.4% and 99.2% respectively on nights. During December 2019 the trust achieved staffing levels of 97.7% for registered nurses and 99.1% for clinical support workers on day shifts and 97.2% and 99.5% respectively on nights.

Greenways continued to feel the same pressures felt during previous months with a high number of vacancies and staff sickness, they continued to apply the same methods to maintain safety as referenced in the September and October Safer Staffing Report.

During November and December the Alderley Unit experienced a higher than usual rate of staff sickness which had an impact on the fill rates.

During the months of November and December the three wards within the Millbrook Unit (Adelphi, Bollin and Croft) were going through a transitional phase whilst staff were moved between the wards and into community teams inline with the Central and East Redesign. This has had an impact on the fill rates, however staff cross cover was provided across wards to respond to clinical need.

Note: Only full shifts are covered within the percentage rates, where wards are supported for less than this, this is not captured in the return. For example if the matron spends 2 hours on the ward this is not reflected in the return, nor are the hours the multi disciplinary team who provide care to support the wards.

Appendix 1 and 2 details how all wards, who did not achieve overall staffing of 95%, maintained patient safety.

Note: Following a data cleanse the fill rates for September and October for Coral and Indigo are detailed below:

Month	Ward	Fill Rate (%)			
		Day	Night	Day	Night
		Registered Nursing Staff		Non Registered Nursing Staff	
Sep-19	Coral Ward	101.0%	105.6%	97.8%	101.3%
Oct-19	Coral Ward	99.1%	98.1%	99.1%	101.3%
Sep-19	Indigo Ward	95.9%	100.0%	100.0%	100.0%
Oct-19	Indigo Ward	100.0%	100.0%	100.0%	100.0%

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

The Board of Directors is recommended to **note** the report

<b>Who has approved this report for receipt at the above meeting?</b>		Gary Flockhart, Director of Nursing, Therapies and Patient Experience
<b>Contributing authors:</b>	Charlotte Hughes, Business and Innovation Manager, Education CWP	
<b>Distribution to other people/ groups/ meetings:</b>		
<b>Version</b>	<b>Name/ group/ meeting</b>	<b>Date issued</b>
1	Hayley McGowan, Associate Director of Nursing and Therapies (Mental Health and Learning Disabilities)	20.01.20
<b>Appendices provided for reference and to give supporting/ contextual information:</b>		
<b>Appendix No.</b>	<b>Appendix title</b>	
1	Ward Daily Staffing November 2019	
2	Ward Daily Staffing December 2019	