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# Report to the Meeting of the

# Oxford Health NHS Foundation Trust

# Board of Directors

**BOD 67/2017**  
(Agenda item: 12)

**Staffing 27th March 2017 to 23rd April 2017**

**Inpatient Safer Staffing Report**

**For Information**

**Introduction**

This is the monthly report to the Board of Directors presenting the actual staff levels (registered and unregistered) of each ward against their required need on a shift by shift basis for a 4 week period from 27th March 2017 to 23rd April 2017. The paper also identifies the percentage of agency usage, sickness and vacancy rates for all in-patient areas.

There is a national requirement for providers to be transparent on the monitoring and reporting of in-patient staffing levels. Ensuring sufficient staffing levels are in place is crucial to deliver safe, effective and high quality care.

**Management of Staffing Levels**

Staffing levels are monitored each week at the Weekly Review Meeting (WRM). Table 1 in the body of the report summarises the staffing position by ward. Each ward undertakes a range of immediate actions on a daily basis to ensure safe staffing levels are maintained appropriate to the needs of patients.

This month seven wards have not met 85% or over expected staffing levels, however in addition all wards are reporting an adverse situation in either the percentage of shifts unfilled, agency use, sickness or vacancies. Despite this it has been reported at the WRM that all wards did maintain minimum staffing levels to remain safe in the delivery of patient care, however it is the view of operational directors that the staffing situation is having an impact on staff morale.

The seven wards identified as not meeting above 85% expected staffing levels were Cotswold House (Oxford), Chaffron, Glyme, Phoenix, Sandford, Sapphire and Vaughan Thomas wards. More detail of the staffing on each of these wards is provided in the report.

The main reason wards have been unable to fully staff every shift is due to sickness rates, vacancies and patient acuity levels. Recruitment difficulties continue to be a significant gap in a number of areas and details of the actions being undertaken are provided in the report driven by the Workforce and Nursing Strategies.

**Recommendations**

The Board is asked to note:

* The processes in place to ensure safe staffing levels on all the wards in the organisation, those wards where there are concerns and the actions being taken to ensure safe staffing.

**Author and Title:** Susan Haynes, Deputy Director of Nursing and Clinical Standards

**Lead Executive Director:** Ros Alstead, Director of Nursing and Clinical Standards

*A risk assessment has been undertaken around the legal issues that this paper presents and there are no issues that need to be referred to the Trust Solicitors. This paper links to all of the five CQC Domains.*

**Inpatient Safer Staffing**

Period: 27th February to 26th March 2017

**Introduction**

This is a monthly report to the Board of Directors presenting the actual staff levels (registered and unregistered) on each ward against their required need on a shift by shift basis for a 4 week period from 27th March 2017 to 23rd April 2017.

This report will be published on our website with a link from NHS Choices website.

**Management of Staffing Levels**

Identified escalation processes for the management of staff shortages remain in place in order to manage staffing safely on a shift by shift basis, with senior staff giving appropriate support to ward teams as and when required. Senior ward staff and immediate manager’s review ward staffing levels on an on-going basis by shift and where there are changes in patient acuity. Matron’s review staffing daily as a minimum and more frequently where required.

The staffing figures are presented, reviewed and discussed at the Weekly Review Meeting (WRM) by the Heads of Nursing, Deputy Director and Director of Nursing. This process enables key staff to assess the current position, ensure there is an appropriate level and skills mix of nursing staff, and to match the acuity and needs of patients in order to provide safe and effective care.

Throughout March 2017 all wards were staffed to achieve safe staffing levels; however this continued to be achieved in some wards by our staff working additional hours and shifts, the high use of temporary staff both from the trusts internal bank ‘staffing solutions’ and external agencies. Where there is high use of agency this is generally long term use of agency cover (especially in forensic services) which provides continuity of care.

**SafeCare Workforce Management System**

In order to assist nursing staff to improve the day to day management of staffing levels, the Trust has recently approved the adoption of the SafeCare IT solution in order to provide live staffing data in the hands of ward managers, matrons, senior nurses and ops. This will clearly show how safe each ward is on a shift-by-shift basis.

A launch of Safe Care took place on Friday 12th May 2017, at which the system was presented ‘live’ to clinical staff from all in-patient areas. This launch was followed by the second project team group meeting. This group will be responsible for identifying an acuity model and for overseeing the implementation of Safecare to all in-patient areas initially.

**Summary Position**

Table 1 below shows the staffing levels by ward for 27th March to 23rd April together with the previous 4 and 8 week period. The data includes a breakdown by day/ night shifts, alongside skills mix, agency, sickness and vacancy figures. The thresholds indicated are based on trust/ national targets and used to highlight particular wards for further review.

During the reporting period seven wards were highlighted as having fallen below 85% of shifts filled to the required numbers during this period (one less than last month); this is an increase of one ward from the previous report. The seven wards which fell below the threshold are Cotswold House (Oxford), Chaffron, Glyme, Phoenix, Sandford, Sapphire, Vaughan Thomas wards.

**CHILDREN AND YOUNGER PEOPLES DIRECTORATE**

**Cotswold House (Oxon)**

Only one ward in the CYP Directorate (Cotswold House Oxon) fell below the agreed threshold of 85% shifts filled. The overall number of shifts which were fully staffed was 81.2% – this is a reduction of 1.9% from the previous month when the figure was 83.3%.

The ward used more unregistered staff with only 42.8% of shifts meeting the required level of 50% registered to unregistered ratio, and employed staff from agencies (5.1% average agency use) to meet vacancies. The overall vacancies are currently at 4.1 WTE.

**ADULT DIRECTORATE**

**Forensic Services**

**Chaffron Ward -** overall 83.8% of shifts on Chaffron ward were fully staffed, which is a decrease of 2.8% from the previous month. The figures shown for by registered and unregistered nurses indicate that show the ward increased its qualified cover from 40.5% last month to 48.9% this month. Sickness has however increased from 4.5% to 13.4%. During the reported period there was no use of agency cover.

**Glyme Ward -** overall 80.7% were fully staffed, a 0.8% increase from last month. The ward has used more unregistered staff (with 42.7 % of shifts covered by registered nurses, a further reduction of 0.7% registered cover from last month). The ward currently has 4.8 WTE vacancies.

**Adult Services**

**Phoenix Ward -** overall 81.3% of shifts were fully staffed, an increase of 1% from last month. The ward has used more unregistered to unregistered staff (with 48.6% of shifts meeting the required 50% registered to unregistered ratio), and has employed some 8.9% average agency use. The sickness rate on Phoenix is currently 4.7% (a reduction of 1% from last month) and the overall vacancies are currently 8.8 WTE (an increase of 0.3WTE from last month).

**Sapphire Ward -** overall 80.1% of shifts were fully staffed (an increase of 5.4% from last month). The ward has used more unregistered to unregistered staff (with 42.9% of shifts meeting the required 50% registered to unregistered ratio), and has employed some nurse agency cover (25.3% 29% average agency use – an increase of 3.3% from last month). The sickness rate on Sapphire is currently 7% and the overall vacancies are currently 11.9 WTE a reduction of 1% from last month.

**Vaughan Thomas Ward -** overall 82% of shifts were fully staffed. This is a reduction of 7.7% from last month. The ward has used more unregistered to unregistered staff (with only 42.9% of shifts meeting the required 50% registered to unregistered ratio). The ward has employed nurse agency cover (20.7% average agency use) and currently has 13.4 WTE vacancies.

**Older People Services**

**Sandford Ward -** The overall number of shifts which were fully staffed was 82.8% which is a further reduction of 1.5% from last month. The ward used more unregistered staff (with only 43.2% of shifts meeting the required 50% registered to unregistered ratio), and employed people on long working lines from agencies (20%). The sickness rate is 9.7% and the current number of vacancies are 9.3, a reduction of 1 WTE from last month

**Threshold**

There are agreed threshold for ward staffing levels. For agency usage the threshold is 5%, sickness 3.5% and vacancies 9%. Wards not mentioned above which are performing adversely against these targets are as follows. These wards achieve 83% staffing to expected levels, some by using longlines of agency.

* Abingdon Ward 1 – Agency use – 9.9%, sickness 4.8% and 5.6 WTE vacancies.
* Abingdon Ward 2 - Agency use – 13.4%, sickness 4% and 9.6 WTE vacancies.
* Allen ward - Agency use – 23.1%, sickness 4.6% and 13.1 WTE vacancies
* Amber ward - Agency use – 24.2%, sickness 14.3% (the highest percentage this month) and 12.3 WTE vacancies
* Ashurst ward - Agency use – 33.8%, sickness 4.7% and 14.9 WTE vacancies
* Bicester Community Hospital – Agency use 5.6%, sickness 10.6% and 3.2 WTE vacancies
* Cotswold House Marlborough - Agency use 6.1% and 7.7 WTE vacancies
* City Community Hospital - Agency use 17.9% and 8.4 WTE vacancies
* Cherwell - sickness 4.1% and 3.6 WTE vacancies
* Highfield CAMHS –Agency use –32.2% (an increase of 16.2%) and 19.4 WTE vacancies (the highest number this month).
* Kennet ward - –Agency use –7.2%, sickness 8% and 5.7 WTE vacancies.
* Kestral ward - Agency use –41.1% (highest percentage again this month) and 17.8 WTE vacancies
* Kingfisher - Agency use – 28.1%, sickness 7% and 13.9 WTE vacancies.
* Lambourne House – sickness 6.1%
* Linfoot ward Witney - Agency use – 7.1%, and 10.1 WTE vacancies
* Marlborough House Swindon (CAMHS) - Agency use –17.7% and 7.4 WTE vacancies
* Opal Ward – 7.5 vacancies
* Ruby Ward - - Agency use –29% and 9.1 WTE vacancies
* St Leonards Wallingford - Agency use –20.7%,
* Watling - Agency use –11.1%, sickness 6.1% and 13.1 WTE vacancies
* Wenric - Agency use –18.5%, sickness 5.5% and 8.7WTE vacancies
* Wenrisc Witney – vacancies 5.7 WTE.
* Wintle - Agency use –14.3% vacancies 8.1 WTE.
* Woodlands – Agency use –8.7%, sickness 8.1% and 3.8 WTE vacancies.

**The reason for the current Challenges**

The main reason wards have been unable to fully staff every shift is due to vacancies related to recruitment difficulties in some geographical areas and some specialties which continue to be given strategic attention. Even with targeted recruitment fewer people are applying for registered posts.

The Director of HR is currently planning to re-launch the recruitment action group in order to look at how the recruitment process can be enhanced and posts within the Trust be made to look more attractive.

This will include strategies including improved career structure for nursing staff from apprentices through to Nurse Consultant posts. The Trust has recently identified 25 members of staff who are undertaking training to become Associate Nurses. This is a two year course which will result in registration with the NMC as a Nurse Associate. These post holders will enhance and support clinical practice and bridge the gap between specialised Registered staff and Healthcare Assistants.

Retention of staff is also a strategic priority and solutions to reduce turnover are proposed in the Workforce and Nursing Strategies. The secondary reasons are due to a rising level of sickness in some wards which are reported above. These are being actively examined ward by ward with support from HR advisors so that solutions can be worked through.

Table 1. Staffing 27th March to 23rd April 2017

|  | % of shifts filled against required numbers (highlighted amber if less than 85%) | | | | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Latest 4 week period - 27th March to 23rd April 2017 | 4 week period - 27th Feb to 26th Mar 17 | 4 week period - 30th Jan to 26th Feb 17 |  | Latest 4 week period - March 27th to April 23rd 2017 | | | | | | | | | | |
| Ward |  | % Registered day shifts filled by nurses (submitted to NHS England) | % Unregistered day shifts filled by nurses (submitted to NHS England) | | % Registered night shift filled by nurses (submitted to NHS England) | % Unregistered night shifts filled by nurses (submitted to NHS England) |  | % Registered Skill Mix (target 50% or more) |  | % Agency Use   (thresholds based on Trust targets, 5%) | % Sickness   (thresholds based on Trust targets, 3.5%) | Vacancies Vs Budget (WTE)   (thresholds based on Trust targets, 9%) |
| Abingdon Ward 1 | 99.4% | 93.7% | 97.3% |  | 101% | 106% | 100% | | 100% |  | 49.4% |  | 9.9% | 4.8% | 5.6 |
| Abingdon Ward 2 | 98.2% | 99.6% | 99.0% |  | 101% | 96% | 100% | | 98% |  | 53.6% |  | 13.4% | 4.0% | 9.6 |
| Allen | 91.6% | 94.2% | 92.8% |  | 90% | 98% | 98% | | 95% |  | 46.0% |  | 23.1% | 7.1% | 12.9 |
| Amber | 93.6% | 100.0% | 93.6% |  | 102% | 97% | 97% | | 99% |  | 37.6% |  | 24.2% | 14.3% | 12.3 |
| Ashurst (PICU) | 94.8% | 90.6% | 93.7% |  | 84% | 111% | 78% | | 111% |  | 32.4% |  | 33.8% | 4.7% | 14.9 |
| Bicester | 98.5% | 98.0% | 98.8% |  | 104% | 91% | 102% | | 98% |  | 55.3% |  | 5.6% | 12.6% | 3.2 |
| Cotswold House Marlborough | 94.5% | 97.0% | 95.0% |  | 97% | 96% | 128% | | 85% |  | 49.6% |  | 6.1% | 0.0% | 7.7 |
| Cotswold House Oxford | 81.2% | 83.3% | 82.2% |  | 105% | 82% | 101% | | 98% |  | 42.8% |  | 5.1% | 10.7% | 4.1 |
| Chaffron | 81.0% | 83.8% | 81.9% |  | 153% | 64% | 104% | | 100% |  | 48.9% |  | 0.0% | 13.4% | 4 |
| Cherwell | 91.1% | 89.7% | 89.0% |  | 80% | 97% | 100% | | 98% |  | 46.3% |  | 4.7% | 4.1% | 3.6 |
| City | 99.2% | 97.8% | 92.2% |  | 115% | 97% | 100% | | 100% |  | 51.8% |  | 17.9% | 4.7% | 8.4 |
| Didcot | 99.7% | 96.7% | 95.7% |  | 100% | 104% | 100% | | 100% |  | 51.0% |  | 6.9% | 2.2% | 0.6 |
| Glyme | 80.7% | 79.9% | 79.0% |  | 89% | 84% | 62% | | 150% |  | 42.7% |  | 1.6% | 4.1% | 4.8 |
| Highfield (CAMHS) | 85.1% | 85.6% | 85.6% |  | 85% | 102% | 126% | | 89% |  | 33.8% |  | 26.7% | 2.1% | 19.4 |
| Kennet | 97.2% | 99.4% | 97.8% |  | 103% | 94% | 101% | | 98% |  | 35.6% |  | 7.2% | 8.0% | 5.7 |
| Kestrel | 96.1% | 94.0% | 94.6% |  | 145% | 81% | 108% | | 96% |  | 39.3% |  | 41.1% | 2.5% | 17.8 |
| Kingfisher | 91.4% | 84.8% | 86.9% |  | 116% | 83% | 91% | | 94% |  | 37.5% |  | 28.1% | 7.0% | 13.9 |
| Lambourne House | 85.2% | 93.7% | 94.6% |  | 112% | 83% | 100% | | 100% |  | 51.3% |  | 1.0% | 6.1% | 0.8 |
| Linfoot Witney | 98.3% | 98.3% | 98.2% |  | 98% | 97% | 98% | | 100% |  | 53.8% |  | 7.1% | 2.8% | 10.1 |
| Marlborough House Swindon (CAMHS) | 97.4% | 97.7% | 98.0% |  | 107% | 93% | 104% | | 93% |  | 50.3% |  | 17.7% | 2.7% | 7.4 |
| Opal (Rehabilitation) | 95.3% | 93.1% | 92.5% |  | 79% | 100% | 76% | | 123% |  | 44.6% |  | 0.7% | 2.5% | 7.5 |
| Phoenix | 81.3% | 80.3% | 80.8% |  | 97% | 95% | 93% | | 99% |  | 48.6% |  | 8.9% | 4.7% | 8.8 |
| Ruby | 86.1% | 94.1% | 76.8% |  | 82% | 96% | 69% | | 93% |  | 38.4% |  | 29.0% | 3.0% | 9.1 |
| Sandford | 81.3% | 82.8% | 81.1% |  | 75% | 98% | 86% | | 103% |  | 43.2% |  | 20.0% | 9.7% | 9.3 |
| Sapphire | 80.1% | 74.7% | 75.2% |  | 85% | 101% | 86% | | 108% |  | 42.9% |  | 20.2% | 7.0% | 11.9 |
| Vaughan Thomas | 74.5% | 82.0% | 86.2% |  | 77% | 109% | 95% | | 97% |  | 44.5% |  | 19.0% | 2.2% | 13.4 |
| St Leonards Wallingford | 97.7% | 98.5% | 98.0% |  | 98% | 98% | 100% | | 96% |  | 49.2% |  | 20.7% | 2.5% | 0.4 |
| Watling | 85.9% | 86.1% | 95.3% |  | 67% | 100% | 82% | | 102% |  | 28.3% |  | 11.1% | 6.1% | 13.1 |
| Wenric | 89.4% | 93.8% | 86.6% |  | 106% | 90% | 95% | | 102% |  | 38.0% |  | 18.5% | 5.5% | 8.7 |
| Wenrisc Witney | 93.2% | 93.9% | 96.0% |  | 92% | 93% | 103% | | 96% |  | 57.6% |  | 4.5% | 3.1% | 5.7 |
| Wintle | 92.8% | 93.4% | 98.2% |  | 69% | 125% | 100% | | 101% |  | 36.8% |  | 14.3% | 2.8% | 8.1 |
| Woodlands | 98.1% | 98.9% | 98.2% |  | 107% | 91% | 109% | | 93% |  | 43.7% |  | 8.7% | 8.1% | 3.8 |

Data source: electronic rostering system