

Safe staffing report January 2022

The East Community Health Wards patient numbers have decreased from last month. Henry Tudor ward has 23 beds and Jubilee ward 16 beds to meet social distancing and infection control requirements. West Berkshire Community Health Wards patient numbers have decreased compared to last month. Wokingham had 3 beds closed to allow for social distancing. Oakwood closed 12 beds temporarily on 31st January to allow for staff shortages, these were all reopened by Monday 7th February. Two of the four acute wards at Prospect Park Hospital have over 90% occupancy this month (Bluebell ward 97.1%; Snowdrop 94.3%) and average occupancy is 91.1%. Lower figures on some wards are due to outbreaks of COVID-19 and the need to cohort patients.

101 staffing incidents were reported (120 in December). The number of shifts reported with less than two registered nurses (RN) per shift is greater than last month; 272 were reported in January compared to 247 in December. This is driven by absence including COVID-19 related sickness and vacancy. There were 6 incidents where there were no RNs at the start of a shift. Staff were moved from other wards to cover and ensure patient safety.

Patient Quality

Mental Health wards

Patient acuity on the acute wards remains high which has resulted in higher levels of observations. Post recruitment the current overall vacancy rate at PPH is currently 13.88% which has increased from the previous month (12.55%). This figure accounts for those staff who have been recruited but are still undergoing employment checks to enable them to commence, therefore, this is not reflected in the figures for January. Further work is commencing on looking at alternative ways to recruit all levels of staff which appeals more widely such as open evening events via teams/zoom with one arranged for mid-February. Recruitment continues to be a challenge across all staff groups as is the national picture.

Average bed occupancy in the acute adults' wards has increased from last month to 91.1% from 87.27% in December (Bluebell ward 97.1%; Rose ward 86.2%; Snowdrop ward 94.3%; Daisy ward 86.8%); Daisy and Rose ward both had beds closed due to COVID-19 during January. Sorrel ward's bed occupancy was identical to December at 88.0%. Rowan ward's bed occupancy increased to 66.1% (62.1% in December); Orchid ward bed occupancy increased to 91.5% from 62.1%. The number of temporary staffing shifts requested for the wards at Prospect Park Hospital for January was 3796; 760 of these were for registered nurse shifts (20.02%). A total of 1157 (30.47%) of all temporary staff requests were unfilled for Prospect Park Hospital, 386 of these unfilled requests were for registered nurses (33.36%).

There were 211 shifts with less than two registered nurses on a shift (201 in December, equating to 31% shifts), this equates to 32% shifts. Orchid had 42 shifts and Rose had 50 shifts with less than two registered nurses. On shifts with less than two registered nursing staff there were senior clinical staff on the wards (Matron, Ward Manager and Clinical Development Lead) and therapy staff based on the wards 9-5pm during the week that provided support. Staff were moved across the hospital (including APOS staff) to assist wards in meeting their minimal staffing requirements when required, support was also provided by the Designated Senior Nurse on duty.

In addition, a number of AHPs worked on the wards to support existing nursing staff and Nurse Associates were utilised when available.

Campion unit bed occupancy was static in January from the previous month at 44.4%. There were 0 shifts with less than two registered nurses. The number of temporary staffing shifts requested for Campion unit was 285; 108 of these were for registered nurse shifts (37.89%).

A total of 75 (26.31%) of all temporary staff requests were unfilled. There were 15 unfilled requests for a registered nurse (20%).

Table 1 below shows the current staffing position at PPH by registered and unregistered staff. This is inline with the new finance forecast plan developed this month hence slight changes in establishments. These figures are less posts offered.

Table 1. Current vacancies:

	Registered nurses (wte)		Total available registered nurses (wte)	Unregistered nurses (wte)	Vacancy (wte)	Total available unregistered nurses (wte)		
PPH	110.52	29.96 (27.11%)	80.56 (72.89%)	191.24	40.36 (21.1%)	150.88 (78.90%)		

Community Health wards (CHS)

East community ward numbers have stabilised but are lower than the West community wards. Jubilee ward had 16 beds and Henry Tudor ward has 23 beds available (24 beds in December) due to meeting social distancing and infection control requirements. West community health wards also have less beds available due to social distancing requirements. Across the West wards there are 3 beds at Wokingham closed for social distancing. Oakwood ward closed 12 beds on 31st January for a temporary period due to staffing shortages caused by absence, these were reopened by 7th February.

The average bed occupancy for the West CHS wards has increased for January to 86.24% from 84.12% in December; (Oakwood Unit 83.6%, Donnington ward 91.1%, Highclere ward 85.2%, Ascot ward 93.1%, Windsor ward 78.2%). The lower occupancy on Windsor ward is due to some beds being closed due to COVID-19 during January.

West CHS wards requested 1251 temporary shifts, 482 were for registered nurses (38.52%). A total of 395 (31.57%) shifts were unfilled; 136 were for registered nurses (34.43%).

Highclere ward had 24 shifts and Donnington ward 2 shifts with less than two registered nurses; they supported each other to ensure both the wards were covered and patient safety maintained. In addition, Nurse Associates were utilised when there was no RN available. Ascot ward had 18 shifts, Windsor ward 3 shifts and Oakwood unit had 6 shifts with less than two registered nurses.

The SafeCare model has been successfully rolled out to the West CHS wards. The data demonstrates that although safety was maintained, the acuity of the patients has meant that the staffing was sub-optimal at times in all three units during January, this was due to being unable to fill all gaps in the staffing rotas (Example of data is demonstrated in Appendix 1). Work is still ongoing to improve consistency in data entry. Figures are provided weekly to Senior Managers.

The average bed occupancy for the East wards in January was 76.65% (70.25% in December); Jubilee ward 83.7%, Henry Tudor ward 69.6%. Henry Tudor ward has a bed capacity of 23 beds as patients and Jubilee ward 16 beds to allow for social distancing and infection control requirements. East CHS wards requested 297 temporary shifts; 88 (29.62%) were for registered nurses. A total of 38 shifts (12.79%) were unfilled; 5 were for registered nurses (13.15%). There were 8 shifts with less than two registered nurses on Jubilee ward and 0 on Henry Tudor ward.

The SafeCare model has now been implemented on both East CHS wards. Data for January indicates that staffing levels are appropriate for the patient numbers and acuity on both wards. However, the tool is still being embedded on the wards with support to improve consistency of data entry.

Table 2: below shows the current staffing position on the community health wards by registered and unregistered staff. These reflect the budget for 2021/22.

	Registered nurses (wte)	Vacancy (wte)	Total available registered nurses (wte)	Unregistered nurses (wte)	Vacancy (wte)	Total available unregistered nurses (wte)		
West CHS wards	62.85	4.5 (7.15%)	58.35 (92.85%)	78.88	4 (5.07%)	74.88 (94.93%)		
East CHS wards	21.29	3 (14.10%)	18.29 (85.90%)	33.01	5.6 (16.97%)	27.41 (81.83%)		
Total	84.14	7.5 (8.92%)	76.64 (91.08%)	111.89	9.6 (8.58%)	102.29 (91.42%)		

Triangulation of Incident Data

The triangulation of the patient safety incident data sets involves medication, patients found on the floor, pressure ulcers, absent and missing, seclusions, prone restraints, self–harm and assaults with staffing level. No incidents were reported as moderate or above during the month as a result of safe staffing.

Safe Staffing Declaration

All of the wards at PPH have registered nurse vacancies and as a result continue to use high levels of temporary staff to achieve the position of safe staffing numbers. In addition, during January the impact of COVID-19 on both our permanent and temporary workforce has resulted in wards across the trust being below their required staffing on many occasions. Therefore, whilst patient safety was maintained across all wards and no incidents were directly reported in relation to safe staffing, patient experience may have been compromised.

Financial Implications

 Continued usage of temporary staff including registered nursing to cover vacancies, absence and levels of observations for patients

Risk Implications

- Number of current registered nurse vacancies across wards
- Levels of absence as a result of COVID-19

Care Hours per Patient Day (CHPPD)

The publication of Lord Carter's review, 'Operational productivity and performance in English acute hospitals: Unwarranted variations', in February 2016 highlighted the importance of the ensuring efficiency and quality across the whole NHS. One of the obstacles identified in eliminating unwarranted variation in clinical staff distribution within the NHS provider sector has been the absence of a single means of consistently recording, reporting and monitoring staff deployment.

In order to provide a consistent way of recording and reporting deployment of staff providing care on inpatient wards, the Care Hours per Patient Day (CHPPD) metric was developed and while it is recognised that the needs of patients using services are often quite different, the CHPPD measure provides a representation of the number of care hours available to patients and it is expected that this measure will enable wards of a similar size, speciality and patient group to be benchmarked in the future. Nationally there is currently limited benchmarking data available at present. CHPPD for all the inpatient areas within Berkshire Healthcare is captured within Table 4 alongside the fill rate and bed occupancy.

Reporting

NHS England requires Trusts to submit monthly staffing data which is displayed on NHS Choices and on the Trust website. The staffing information required to be displayed is the total monthly planned staff hours versus actual staff hours (percentage fill). This information is split by day shift/ night shift and by registered nurses/ unregistered care staff. NHS England has not released the parameters against which staffing levels should be RAG rated as this is a decision for local Trusts and their Board. This information is detailed in Table 4 of the report.

Guidance published in November 2014 by the Department of Health based on NICE guidelines for safe staffing (in acute hospitals) identified 'red flags' where safety has the potential to be compromised. One of these red flags was monitoring when wards had less than two registered nurses present on the ward during a shift. All our Mental Health and Community Wards are staffed to provide two registered staff on every shift and the shifts with less than two registered staff on duty are detailed in table 4. For Campion Unit (Learning Disability unit) the agreed staffing levels are two registered nurses during the day and one registered nurse at night, therefore it is breaches in these levels that are captured in Table 4 for Inpatient wards.

Main themes from this month's report

- Two of the four mental health wards had occupancy of over 90% due to COVID-19 and the cohorting of patients
- Recruitment of both Registered Nurses and HCAs remains challenging in line with the national picture
- There continues to be a high level of temporary staff usage to cover vacancies, absences and high levels of observations
- COVID-19 has had a significant impact on staffing absence across all wards

Appendix 1

Example of West Community Health Services Data Showing Required v Actual Hours.

To note: the spikes in data are where information has been omitted.

Oakwood Ward (January 2022)



West Berkshire Inpatient Wards (January 2022)



Wokingham Inpatient Wards (January 2022)





Green [G]	Amber [A]	Red [R]
No identified impact on quality and safety of care provided because of staffing issues.	Although there appears to be no direct correlation between staffing and any specific incidents that occurred during the month, the high number of temporary staff required throughout the month provides a challenge with delivering continuity of care and may compromise patient experience.	There appears to be a correlation between staffing and specific incidents, safety was compromised.

Ward	Budgeted workforce (wte)		% DAY FILL RATE			% NIGHT FILL RATE			Bed	CARE HOURS PER PATIENT DAY					No. of shifts with less than 2 RN		No. of incidents	No incidents where harm caused as a				
			RN	НСА	Q NA	UnQ NA	RN	НСА	Q NA	UnQ NA	Occupancy %	Month cumulative patient count	RN	НСА	Q RA	UnQ RA	Total	Day	Night	reported linked to staffing	result of reduced staffing	rating
Bluebell	35.00	7.35	79.03	139.92	0.00	0.00	103.23	194.62	0.00	0.00	97.1	662	2.1	6.9	0.0	0.0	9.0	29	2	1	0	[A]
Daisy	35.95	10.15	96.54	116.45	48.00	0.00	88.71	171.77	0.00	0.00	86.8	538	2.5	9.3	0.1	0.0	11.9	19	7	34	0	[A]
Rose	34.15	14.15	70.76	134.65	0.00	56.67	79.03	161.29	0.00	0.00	86.2	588	2.0	8.3	0.0	0.1	10.4	37	13	3	0	[A]
Snowdrop	35.95	8.87	87.90	98.71	0.00	0.00	80.65	140.32	0.00	0.00	94.3	643	2.1	6.5	0.0	0.0	8.6	21	12	4	0	[A]
Orchid	36.00	6.8	81.45	110.00	0.00	0.00	77.45	176.61	0.00	0.00	91.5	567	2.2	8.7	0.0	0.0	10.9	27	15	5	0	[A]
Rowan	42.00	13.4	96.77	120.13	0.00	93.00	75.81	162.10	0.00	0.00	66.1	410	3.4	11.6	0.0	0.3	15.4	9	15	5	0	[A]
Sorrel	38.00	7.36	97.58	120.32	0.00	16.00	98.77	125.81	0.00	100.00	88.0	300	5.2	14.9	0.0	0.3	20.1	3	2	0	0	[A]
Campion	37.11	4	141.94	130.61	0.00	0.00	135.48	108.47	0.00	0.00	44.4	124	14.3	29.1	0.0	0.7	44.1	0	0	0	0	[G]
Donnington	63.46	1.5	95.48	105.73	76.50	0.00	96.77	101.61	0.00	0.00	91.1	847	1.9	4.1	0.3	0.0	6.3	0	2	10	0	[A]
Highclere	03.40	1.5	86.86	75.63	44.17	70.00	90.32	88.71	0.00	0.00	85.2	396	3.1	4.2	0.3	0.3	7.9	18	6	17	0	[A]
Oakwood	46.67	1	81.72	86.13	0.00	0.00	100.00	112.90	0.00	0.00	83.6	648	2.7	4.2	0.0	0.0	6.9	6	0	15	0	[A]
Ascot	61.31	6	88.92	83.33	0.00	0.00	93.55	129.03	0.00	0.00	93.1	489	3.0	3.3	0.0	0.0	6.3	14	4	2	0	[A]
Windsor	01.31	6	76.88	90.78	0.00	0.00	100.00	98.39	0.00	0.00	78.2	599	2.9	3.6	0.0	0.0	6.5	3	0	6	0	[A]
Henry Tudor	32.80	5.6	114.41	83.66	0.00	48.33	143.21	150.14	0.00	100.00	69.6	468	4.3	5.0	0.0	0.3	9.6	0	0	0	0	[G]
Jubilee	30.23	3	78.39	84.19	0.00	0.00	90.32	109.68	0.00	0.00	83.7	415	3.3	5.7	0.0	0.0	9.0	2	6	0	0	[G]