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## Safe Staffing Report: September 2024

### Safe Staffing Declaration

Across the last month, based on available data all the wards have been considered to have been safe and staffed to levels required to meet patient need. There continues to be a reliance on temporary staffing to achieve this position, due primarily to staffing vacancies with the mental health wards being most significantly impacted; and alongside this absence related factors have also contributed to reduced staffing availability. Whilst there is much support available to the wards from senior and specialist staff not factored into staffing rotas as well as therapy staff to achieve the right numbers, the continual reliance on temporary nursing staffing and reduced registered nursing staff on some shifts means that continuity of staffing was not always optimal and patient experience may have been compromised.

### Analysis of staffing position

#### Right staff, right place and time

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 seen as a red flag and highlighted in the local dashboard. For Campion Unit (Learning Disability unit) the agreed staffing levels are two registered nurses during the day and one registered nurse at night.

On shifts with less than two registered nursing staff there were senior clinical staff on the wards (Ward Manager, Matron and for the mental health wards there is also a Clinical Development Lead/Charge Nurse) and therapy staff based on the wards 9-5pm during the week that provided support. Out of Hours there is a senior nurse covering Prospect Park mental health wards as well as on call arrangements covering all wards. These staff are not counted within the safer care tool and need to be factored in when assessing the provision of safe and appropriate care.

At Prospect Park staff were moved across hospital (including APOS staff) to assist wards including where there less than 2 registered staff on duty to support meeting their minimal staffing requirements (shifts with less than 2 registered nursing staff are detailed in dashboard on page 3).

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In the Community West wards some of the vacancy is planned to enable use of NHSP which supports flexibility.

There were 8 reported staffing issues from Datix, with no or low harm. Triangulation of complaints, patient feedback and clinical patient safety incident data sets involving medication, falls, pressure ulcers, absent and missing patients, seclusions, prone restraints, self-harm and assaults did not reveal any incidents of moderate harm or above during the month because of staffing levels.

### **Temporary staffing.**

The need for temporary staff continues to be driven by vacancy, absence, and the need to increase staffing numbers to meet acuity and need of patients.

	Total number temporary staffing shifts requested	Number of temporary shifts requested to fill registered staff gap	Total temporary shifts unfilled
PPH	3126	491	87
West Community Wards	922	328	9
East Community Wards	320	82	13
Campion	499	111	16

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

### Berkshire Healthcare Local Dashboard

Ward		Vacancy		Sickness % /Mat leave-in brackets		No. of bank agency used WTE		Total available workforce		No. of shifts with less than 2 RN's		Occupancy %		Fill rate analysis (NQB) Actual hours worked divided by planned hours				Overall CHPPD		No. of Incidents reported where moderate harm or above was caused related to staffing		Patient experience feedback		RAG Rating
		RN	HCA	RN	HCA	RN	HCA	RN	HCA					Day Shift		Night Shift						Patient experience scores (out of 5) lwGC	No. of complaints	
														% Fill rate Registered nurses. (Rounded up to whole number).	% Fill rate unregistered nurses (including N/As) (Rounded up to whole number).	% Fill rate Registered nurses. (Rounded up to whole number).	% Fill rate unregistered nurses (including NAs) (Rounded up to whole number).							
Bluebell	42.9	4.69	9.06	3.9	7.57	3.33	15.25	10.47	27.06	1	97.3	100	139	97	152	11.6	0	4.33	0					
Daisy	42.9	3.56	11.15	0	1.79	3.35	11.3	12.05	30.26	2	98.3	98	108	100	131	10.2	0	3.98	1					
Rose	42.9	7.00	12.53	3.2	3.77	3.64	12.33	10.30	29.31	6	98.5	96	115	98	131	9.5	0	4.09	1					
Snowdrop	42.9	6.26	8.63	1.6	4.71	5.68	9.55	11.49	30.09	0	100	102	119	100	140	9.3	0	3.92	0					
Orchid	61.3	3.16	17.51	17.6 (1)	13.3	3.48	31.78	10.37	54.91	13	86.3	93	273	97	362	19.1	0	4.09	0					
Rowan	61.3	2.26	20.16	0.5	7.53	2.01	37.44	11.95	61.34	2	89.1	105	270	100	276	23.3	0	4.23	0					
Sorrel	42.9	7.62	14.05	2.7 (1)	3.40	4.99	16.04	20.12	31.54	0	90.9	100	126	100	147	20.9	0	3.78	0					
Campion	33	1.30	0.6	4	11.4	5.9	26.48	14.78	42.60	0	95.7	223	330	200	194	47.2	0	5.00	0					
Donnington	64.3	13.2		2.4 (1)	2.6	7.35	8.86	33.45	43.35	0	85.5	99	95	149	101	7.0	0	4.60	0					
Highclere										4	84.7	95	65	100	98	8.1	0		0					
Oakwood	41.7	4.38		3.6 (1)	5.58	1.35	6.4	16.55	24.27	0	91.7	97	110	100	118	7.5	0	4.47	0					
Ascot	55.8	7.31		15.2 (1)	8.55	8.37	11.36	30.07	34.11	11	78.3	90	100	102	206	8.8	0	4.59	0					
Windsor										0	89.7	58	19	132	234	6.1	0	1						
Henry Tudor	41.5	-1.45	4.89	5.8	11.3	4.16	10.11	21.15	14.52	0	77	139	107	159	169	7.8	0	4.60	1					
Jubilee	35.4	3.83	-0.6	3.3	1.24	1.96	4.99	9.23	25.35	0	89	77	90	97	145	9.7	0	4.67	0					

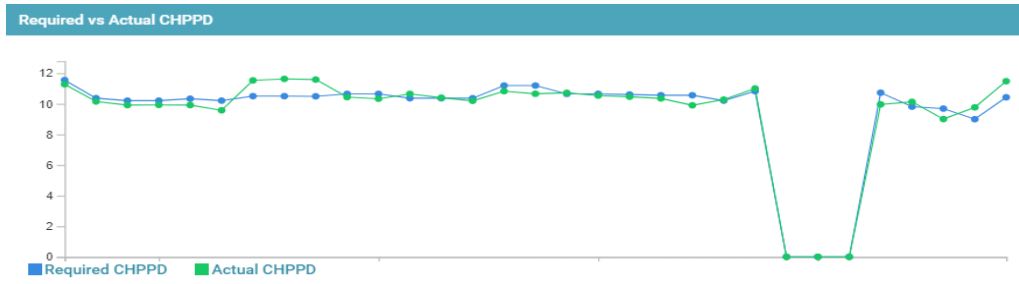
# Appendix

## Safecare Data for all Berkshire Healthcare Wards August 2024

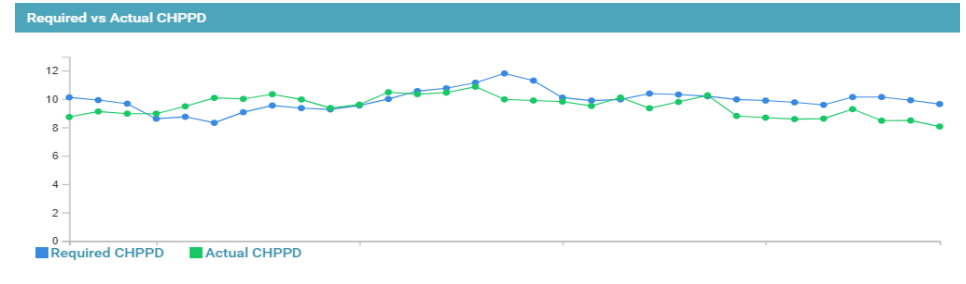
### Prospect Park Hospital

At PPH all the wards have dedicated therapy resources which provide care to patients, there are also matrons and clinical development leads/charge nurses who are not included in the ward numbers or data below. Available data demonstrated that wards were safely staffed during July with available staffing matching patient need.

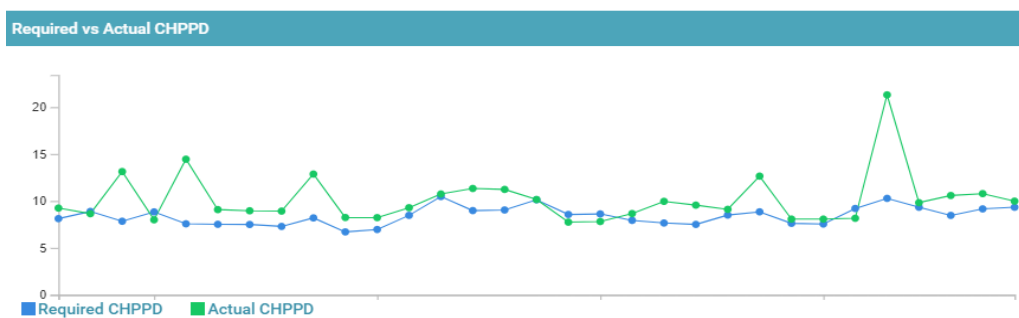
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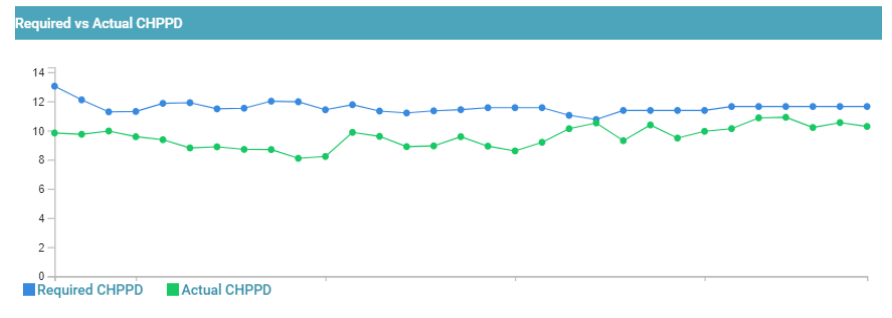
#### Daisy:



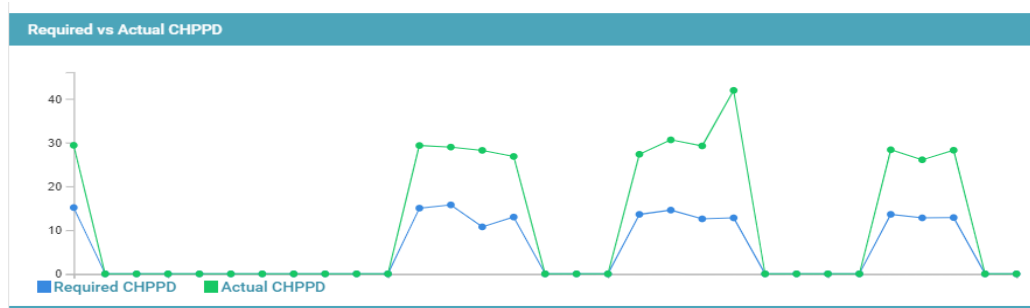
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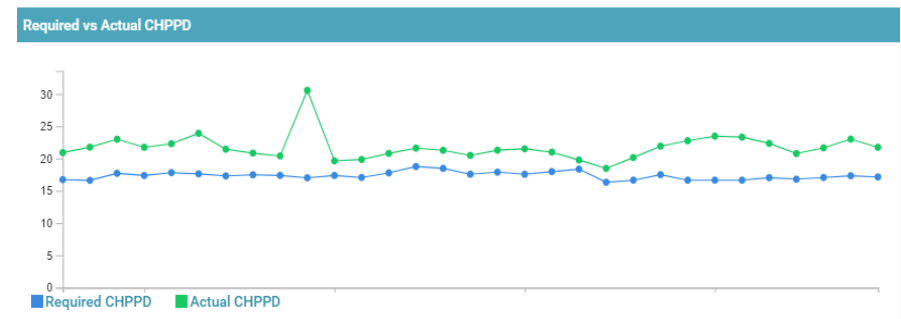
#### Snowdrop:



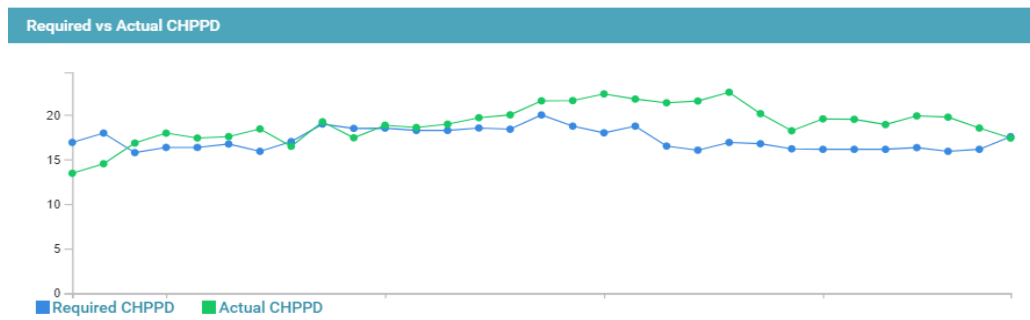
## Orchid:



## Rowan:



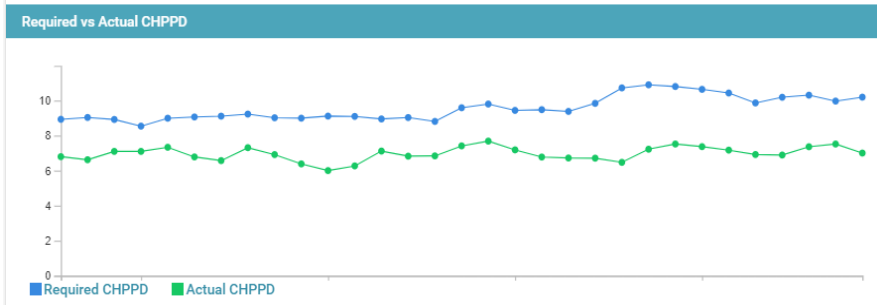
## Sorrel:



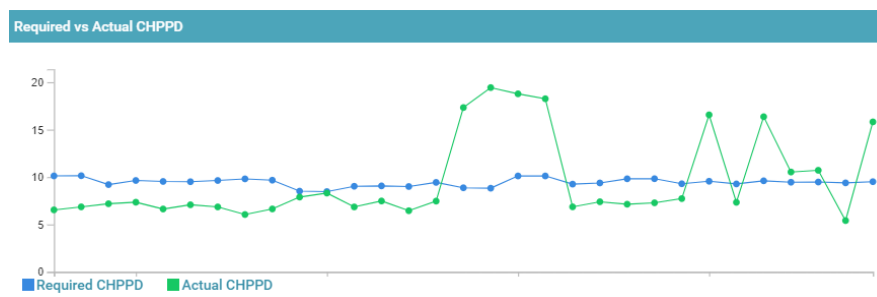
## West Community Health Service Wards

All the rehabilitation wards across the Trust have therapy staff (Oakwood 6.18 WTE, Wokingham wards 13.67 WTE and West Berkshire wards 14.21 WTE). Across all the wards the safer care tool is indicating that the staffing was suboptimal for the acuity of patients. Wokingham wards had high sickness in staff, especially amongst RNs, and high acuity in patients, Oakwood had high dependency in their patients and a number of patients on 1:1's which is the reason for difference between actual and required at Wokingham and Oakwood. There are staff not counted within Safecare, including ward managers and therapy staff who were on the ward to provide care and support to the patients. Further work is currently being undertaken around the West ward's establishment and dependency/acuity recording and utilising the up dated version of the Safer Nursing Care Tool to ensure data is accurate.

### Oakwood Unit:



### West Berkshire Community Hospital:



## Henry Tudor Ward:

Required vs Actual CHPPD

