

Safe staffing report March 2021

The East Community Health Wards continue to have lower than expected patient numbers. Henry Tudor ward increased its capacity from 24 to 29 beds to manage the extra patients with COVID-19 and Jubilee ward reduced its bed capacity temporarily to 11. Jubilee ward has now increased beds back up to 17 patients and the additional beds on Henry Tudor ward are closing as patients are discharged. West Berkshire Community Health Wards patient numbers have remained similar to last month. Three of the acute wards at Prospect Park Hospital have seen an increase in occupancy this month. The number of COVID-19 cases has significantly decreased across the Trust.

101 staffing incidents were reported (85 in February) and all were of low or minor severity. Compared to the previous month this has increased. Some of the lower than expected bed occupancy on the community wards has enabled the wards to manage their patient dependency especially in the East. The number of shifts reported with less than two registered nurses (RN) per shift increased from last month; 100 were reported in March compared to 78 in February. Bluebell ward reported 1 shift with no RNs at the start of a shift. Staff were moved from other wards to ensure cover and patient safety. The second COVID-19 wave has meant that there have been increased incidences of staff sickness which has affected both the staffing levels and the availability of temporary staff. In addition, a number of AHPs have been working on the mental health wards to support existing nursing staff. This is reflected in the AHP CHPPD data.

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 12.31%. 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 March; two band 5 posts and a Deputy ward manager post filled. HCA recruitment continues to be positive; 12 HCAs have been recruited and 7 of those used to fill existing gaps. The remaining 5 are additional posts. Registered Nurse recruitment continues to be a challenge although all 3 Matron posts have now been filled. Work is currently underway in recruitment to attract staff via social media platforms to registered nurse positions of all grades.

Average bed occupancy in the acute adults' wards increased to 91.79% from 85.92% in February. Two of the acute adult wards had occupancy under 90% (Bluebell ward 95.16%; Rose ward 89.74%; Snowdrop ward 98.24%; Daisy ward 84.03%).

Sorrel ward's bed occupancy increased to 96.19% (92.21% in February). Rowan ward's bed occupancy decreased to 49.19% (56.07% in February); Orchid ward bed occupancy decreased to 76.13% from 79.46%. The number of temporary staffing shifts requested for the wards at Prospect Park Hospital for March was 3210; 672 of these were for registered nurse shifts (20.93%). A total of 607 (18.91%) of all temporary staff requests were unfilled for Prospect Park Hospital, 143 of these unfilled requests were for registered nurses (23.56%).

There were 82 shifts with less than two registered nurses on a shift (58 in February). Daisy ward had 15 and Bluebell ward had 32 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.

Campion unit bed occupancy decreased to 37.99% from 46.24% in February. There were no shifts with less than two registered nurses. The number of temporary staffing shifts requested for Campion unit was 368; 165 of these were for registered nurse shifts (44.84%). A total of 32 (8.69%) of all temporary staff requests were unfilled. There were 4 unfilled requests for a registered nurse (12.5%).

The bed occupancy at Willow House during March decreased to 62.01% from February at 73.41% and patient acuity has remained high. The unit is working with three registered nurses and five support staff during the day and three registered nurses and three support staff at night to manage the patient acuity and support the high levels of observations for the very challenging young people on the unit. The number of temporary shifts requested was 309, with 119 shifts requested for registered nurses (38.51%). 43 shifts were unfilled (13.92%) 14 of which were for registered nurses (32.55%). There were 3 shifts with less than two registered nurses. The Ward Manager continued to support the team during weekdays 9-5pm and there was access to a manager/senior nurse on call out of hours as needed. There continues to be high levels of temporary staffing on Willow House which affects continuity of care. The recent recruitment campaign has actively increased the permanent staff on the unit with several staff being recruited as demonstrated in Table 1a. Therefore, the numbers are much improved especially in relation to unregistered staff for which there are currently minimal vacancies.

From the end of April 2021, the service provided by Willow House is changing and CAMHS (Children and Adolescent Mental Health Services) Tier 4 services will become a 24/7 out of hospital service. This will enable a greater number of children and young people in Berkshire to receive better care and outcomes. Therefore, data will be reported for the last time in next month's report.

Table 1 below shows the current staffing position at PPH by registered and unregistered staff. These reflect the budget for 2020/21. 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	110.15	33.96 (28.10%)	76.19 (69.17%)	167.8	27.48 (16.38%)	140.32 (83.6%)		

Table 1a. Willow House:

	Registered nurses (wte)	(wte) (wte) registered nurses (wte)		Unregistered nurses (wte)	Vacancy (wte)	Total available unregistered nurses (wte)			
Willow House	9.21	2.92 (31.70%)	6.29 (68.30%)	10.7	0.4 (3.730%)	10.3 (96.27%)			

Community Health wards (CHS)

Lower bed occupancy in East has continued to assist with their patient dependency. Jubilee ward occupancy decreased and Henry Tudor ward numbers increased; this was due to proactively placing COVID-19 positive patients on Henry Tudor ward and reducing the bed number on Jubilee ward to 11. This was adjusted in the data collection. The West Community Health wards occupancy levels were comparable with February figures.

The average bed occupancy for the West CHS wards remained comparable to February's figures at 83.46%; (Oakwood Unit 94.27%, Donnington ward 86.02%, Highclere ward 70.29%, Ascot ward 89.03%, Windsor ward 77.70%). West CHS wards requested 971 temporary shifts, 457 were for registered nurses (47.06%). A total of 194 (19.98%) shifts were unfilled; 56 were for registered nurses (28.86%).

Highclere ward had 7 shifts and Donnington ward 0 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 only RN available. Ascot ward had 7 shifts with less than two registered nurses, Windsor ward 1 and Oakwood Unit all had 0 shifts with less than two registered nurses.

The average bed occupancy for the East wards decreased to 37.53% from 47.2% last month: Jubilee ward 13.78%, Henry Tudor ward 61.29%. Henry Tudor ward temporarily increased its bed capacity from 24 to 29 beds to accommodate COVID-19 patients from secondary care. Staffing allocation was increased temporarily to accommodate this. Jubilee halved its bed number from 22 to 11. The data collection tool was adjusted to reflect this.

From 6th April Jubilee ward increased its capacity to 17 beds and Henry Tudor reduced its capacity back to 20 beds as patients were discharged. East CHS wards requested 492 temporary shifts; 176 (35.77%) were for registered nurses. A total of 55 shifts (11.18%) were unfilled; 1 was for a registered nurse (1.82%). There were 0 shifts with less than two registered nurses on Henry Tudor ward. Jubilee ward had a much-reduced patient occupancy in March often with only 1 patient in the ward. Therefore, the ward was staffed with 1 RN on several occasions but staffing levels were safe. Jubilee ward continues to use an extra unregistered nurse at night due to the potential fire risk when on the Upton hospital site.

	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	1 (1.59%)	61.85 (98.41%)	78.88	0 (0%)	78.88 (100%)
East CHS wards	21.29	4 (18.78%)	17.29 (81.22%)	33.01	1 (3.03%)	32.01 (96.97%)
Total	84.14	5 (5.94%)	79.14 (94.06%)	111.89	1 (0.89%)	110.89 (99.11%)

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 This did not demonstrate any incidents of moderate or above harm as a result of staffing levels during March.

Safe Staffing Declaration

All of the acute mental health wards, Orchid and Rowan ward have the highest numbers of registered nurse vacancies and as a result continue to use high levels of temporary staff to achieve the position of safe staffing numbers. During March, staffing on all of the wards across the trust was impacted by COVID-19 due to absence and also the need to ensure that our staff assessed as high risk were not directly involved in care for COVID-19 positive patients.

This has resulted in increased requests for temporary staffing in some areas to support achieving safe staffing levels.

Whilst patient safety was maintained across all wards and no incidents reported in relation to safe staffing were of moderate or above harm; it is possible that patient experience was 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

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. Collection of this data has only just commenced nationally so there is currently limited benchmarking data available at present. CHPPD for all the inpatient areas within Berkshire Healthcare is captured within Table 3 alongside the fill rate and bed occupancy.

Table 3: shows the CHPPD on Berkshire Healthcare wards for March and provides comparison with available data in model hospital when comparing with other Trusts with the same CQC rating.

Table 3

<u>-</u>	CHPPD per ward ember 2020	Data taken from Model Hospital's latest available report September 2020								
Ward	BHFT	Peer median	National median							
Bluebell	9.0									
Daisy	9.7	11.77	11.29							
Rose	11.2	11.77	11.29							
Snowdrop	7.7									
Rowan	21.9	11.32	13.09							
Orchid	12.8	11.32	13.09							
Sorrel	17.8	21.97	21.96							
Campion	57.9	27.27	29.78							
Willow House	29.6	21.95	21.72							
Donnington	6.5									
Highclere	7.6									
Oakwood	7.3									
Ascot	7.6	7	7							
Windsor	6.7									
Henry Tudor	6.4									
Jubilee	38.8									

Comparison with the national and peer medians demonstrate a continued variance between BHFT wards and other comparable trusts, this variance is affected also by the level of additional observations required (Willow House).

Due to the lower than expected bed occupancy, particularly on the Rowan ward, Jubilee ward, and Campion, the CHPPD appears high.

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.

Table 4 below displays the total budgeted workforce, vacancy, sickness, and maternity leave. The total monthly planned staff hours versus actual staff hours (percentage fill) along with the care hours per patient day (CHPPD) are also reported. This information is split by day shift/night shift and by registered nurses/unregistered care staff. Sickness and maternity leave data not available in time for this report.

Overall RAG rating for the table as indicated in the following table.



[Green]	[Amber]	[Red]
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)	Vacancy (wte)	% DAY FILL RATE				% NIGHT FILL RATE				Bed	CARE HOUSE PER PATIENT DAY					No. of shifts with less than 2 RN		No. of incidents	No incidents where		
			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	harm caused because of reduced staffing	RAG
Bluebell	35.00	6.15	83.87	137.10	0	0	88.71	190.32	0	0	95.16%	649	2.1	6.9	0.0	0.0	9.0	25	7	5	0	[A]
Daisy	35.95	10.51	98.08	90.32	95.00	0	100.00	102.38	0	0	84.03%	521	2.7	6.7	0.3	0.0	9.7	15	0	37	0	[A]
Rose	34.15	5.95	95.16	130.03	0	79.50	100.00	176.62	0	0	89.74%	612	2.5	8.5	0.0	0.2	11.2	9	1	1	0	[A]
Snowdrop	35.95	7.03	92.74	98.39	0	0	96.77	103.23	0	0	98.24%	670	2.3	5.5	0.0	0.0	7.7	9	2	0	0	[A]
Orchid	36.00	8.8	106.45	127.42	0	0	100.00	203.23	0	0	76.13%	472	3.5	9.3	0.0	0.0	12.8	3	0	1	0	[A]
Rowan	42.00	12	103.23	127.44	0	82.17	85.48	168.77	0	0	49.19%	305	5.0	16.5	0.0	0.4	21.9	0	9	1	0	[A]
Sorrel	38.00	6	98.39	112.90	0	0	100.00	121.77	0	0	96.19%	328	4.8	13.0	0.0	0.0	17.8	2	0	0	0	[A]
Campion	37.11	0	195.11	131.17	0	0	129.03	124.16	0	0	37.99%	106	21.2	36.8	0.0	0.0	57.9	0	0	0	0	[G]
Willow House	23.42	2.96	77.72	96.77	0	0	66.67	134.41	0	0	62.00%	173	9.7	19.9	0.0	0.0	29.6	2	1	0	0	[G]
Donnington	63.46	0	108.77	94.98	60.50	0	100.00	100.00	100	0	86.02%	800	2.1	4.0	0.4	0.0	6.5	0	0	20	0	[G]
Highclere	03.40	O	103.49	73.94	85.17	21.67	93.55	88.71	0	0	70.29%	414	3.0	4.0	0.6	0.1	7.6	7	0	36	0	[G]
Oakwood	46.67	0.8	92.47	102.90	0	0	100.00	125.81	0	0	94.27%	692	2.8	4.6	0.0	0.0	7.3	0	0	0	0	[G]
Ascot	61.31 1	1	98.28	98.92	0	0	90.32	103.23	0	0	89.03%	430	3.6	4.0	0.0	0.0	7.6	2	5	0	0	[G]
Windsor		1	84.70	100.92	76.33	0	100.00	106.45	100	0	77.70%	634	2.7	3.7	0.2	0.0	6.7	1	0	0	0	[G]
Henry Tudor	32.80	1	102.42	118.22	0	0	100.00	124.19	0	0	61.30%	695	2.3	4.1	0.0	0.0	6.4	0	0	0	0	[G]
Jubilee	30.23	4	78.71	31.40	0	0	61.29	37.10	0	0	13.78%	47	24.3	14.6	0.0	0.0	38.8	0	0	0	0	[G]