

Right Staffing Report November 2014

Agenda Item:	13	Reference:	WCT14/15-216
Meeting Name:	Trust Board	Meeting Date:	3 December 2014
Lead Director:	Sandra Christie John Lancaster		
Job Title:	Director of Quality and Nursing Director of Operations		

Link to Business Plan:	Comply with national standards for quality		
Has an Equality Impact Assessment (EQIA) been undertaken & attached?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
Has the Public & Stakeholders been consulted?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
To Approve <input type="checkbox"/>	To Note <input type="checkbox"/>	To Assure <input checked="" type="checkbox"/>	

Financial Implications:

*E.g. What is the Impact on the Trust? Does it provide Value for Money?
All costs should be clearly explained in the section below.*

To be included in future papers.

Overall Cost / Pressure:	£N/A	Overall Income:	£N/A
Additional Funding Required:	£N/A	Funding Already Ring Fenced:	£N/A

Identified Risks:

None identified

Assurance to Board:

Through the right staffing group there are robust systems and processes in place to assess that there is sufficient nursing and care staffing capacity and capability to provide high quality care to patients.

Publish on Website: Yes No **Private Business:** Yes No

Report History

Submitted to	Date	Brief Summary of Outcome
		Presented to board monthly from March 2014

Wirral Community NHS Trust

Right Staffing Report November 2014

Purpose

1. This paper sets out the current status with regard to right staffing levels within the trust for 01 October – 30 October 2014.

Background

2. The board agreed the right staffing action plan in January 2014. An update on the plan can be found at **appendix 1**.
3. The action plan implementation is being led by the Director of Quality and Nursing and the Director of Operations.
4. Current progress against this action plan is reported below.

Staffing Incidents

5. Staffing related incidents are reported via the Datix system. The profile of these incidents from 01 January to date is listed in **Appendix 2**.

Community Nursing

6. Wirral Community NHS Trust has 15 community Nursing Teams across Wirral.
7. From 01 November 2014, staffing levels for registered nurses and care staff for both day and night shifts have been recorded daily.
8. At the end of each month a spread sheet detailing the staffing levels for each team will be updated.
9. The community nursing right staffing report will be reported to the Board in January 2015.
10. The report will provide an overview of the staffing levels within the Trust's Community Nursing Teams and where staffing levels fall below the agreed community nursing % threshold, it will provide an explanation for the shortfall and the actions the Division took to ensure that the safety and experience of patients was not affected (see **Appendix 3** for example template) .

Conclusion

11. While ensuring adequate staffing is critical to the safe delivery of quality care, and having sufficient staff to meet demand avoids the unnecessary costs associated with lower quality of care, staff sickness absence, and high staff turnover the term safe staffing has led to some unnecessary escalation of staffing incidents within the organisations.

Board Action

12. Directors of the Board are asked to:

- Note the progress with the right staffing action plan
- Note the progress in relation to the community nursing safe staffing model
- Be assured that there is a robust process in place to develop the right systems and processes to assess and assure the board that there is sufficient staffing capacity and capability in place to provide high quality care to patients.

Sandra Christie

Director of Quality and Nursing

John Lancaster

Director of Operations

Contributors:

Paula Simpson, Head of Quality and Nursing.

Adrian Evans Community Nursing Operational Manager

Appendix 1. Right staffing action plan

Action Plan

KEY (Change status)

- 1 Recommendation agreed but not yet actioned
- 2 Action in progress
- 3 Recommendation fully implemented
- 4 Recommendation never actioned (please state reasons)
- 5 Other (please provide supporting information)

Action plan lead	Director of Quality and Nursing/Director of Operations
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Expectation	Actions required	Action by date	Person responsible	Comments/ action status	Change stage (see Key)
1. Boards take full responsibility for the quality of care provided to patients, and as a key determinant of quality, take full and collective responsibility for nursing, midwifery and care staffing capacity and capability	Safe staffing establishment to be set in:				
	Unplanned care – Walk In Centres	30 April 2014 – complete	Director of Quality and Nursing/Director of Operations/ Medical Director	Complete	3
	Community nursing	30 May 2014 30 June 2014 Complete 30 September 2014			
	Out of hours	30 June 2014			

	And taken to the board for sign off	31 July 2014 30 September 2014			
	Phlebotomy	31 July 2014 – complete			
	Monthly reporting on actual nursing staff on duty against set establishment on a shift by shift basis by team	30 April 2014 30 May 2014 30 June 2014 30 September 2014 30 March 2015 This revised date allows for the introduction of Rotor Master	Director of Quality and Nursing/ Medical Director		2
	Review the impact set establishment on any previously agreed Cost Improvement Plans (CIP)	30 June 2014	Director of Operations/Director of Finance	Complete	3 Action complete
2. Processes are in place to enable staffing establishments to be met on a shift-to-shift basis.	Implement an e-rostering system in: Community nursing unplanned care and GP OOH's which allows the Director of Quality and Nursing, the Medical Director and the Direct of Operations and their teams to routinely monitor shift by shift staffing	31 March 2014 30 May 2014 30 March 2015 This revised date allows for the introduction of Rotor Master in community nursing Already in place in	Director of Operations		2

	levels	Ooh's and WIC			
	Develop an escalation policy and contingency plan for staffing issues in community nursing, unplanned care and GP OOH's and communicate them to all staff	31 March 2014 30 May 2014 30 June 2014 This revised date allows for the introduction of Rotor Master	Director of Quality and Nursing/ Director of Operations Medical Director	Complete	3 Action complete
3. Evidence-based tools are used to inform nursing, midwifery and care staffing capacity and capability.	Trial use of the HURST tool in community nursing to manage the weekly and daily workload, matching skills and competency to patient need and agree use if appropriate	31 March 2014	Director of Quality and Nursing/ Director of Operations	Complete Tool did not allow for local flexibility so trial of forecasting model in community nursing during April	3 Action complete
	Agree tools to be used in: Unplanned care - WIC	31 March 2014	Director of Quality and Nursing/ Director of Operations Medical Director	Unplanned care complete	3 Action complete
	Agree tools to be used in: Community nursing	30 May 2014	Director of Quality and Nursing/ Director of Operations Medical Director	Complete	3 Action complete
	Agree tools to be used in: Out of hours	30 May 2014	Director of Quality and Nursing/ Director of Operations	Complete	3 Action complete

			Medical Director		
	Establishment levels to be reviewed and a board paper submitted every 6 months	31 October 2014 30 June 2014 31 October 2014 Revised to take account of the most recent guidance from the NQB	Director of Quality and Nursing/ Director of Operations Medical Director	Will start when establishment levels work complete	3 Complete for WIC
4. Clinical and managerial leaders foster a culture of professionalism and responsiveness, where staff feel able to raise concerns.	Raising concerns code added to datix with direct email route to relevant Director	Current practice	Director of Quality and Nursing	Complete	3 action complete
	Review of contracts of employment and HR policies to ensure there is no reference to gagging clauses	30/11/2013	Director of HR and OD	Complete	3 action complete
	Number of raising concerns incidents to be reported monthly in the Quality Report	Current practice	Director of Quality and Nursing	Complete	3 action complete
	Raising concerns section to be developed on staff zone including links to professional guidance and the Speak out Safely Campaign	Current practice	Director of Quality and Nursing/ Director of HR and OD	Complete	3 action complete
5. A multi-professional approach is taken when setting nursing, midwifery and care	Safe staffing steering group to be established with membership to include senior representatives from each	31 December 2013	Director of Quality and Nursing/ Director of Operations	Complete	3 action complete

staffing establishments.	Division				
	A project plan to be developed with timescales for each clinical services review of staffing	31 January 2014	PMO Lead	Complete	3 Action complete
	Clinical representatives from each service to be included in the safe staffing project groups: Unplanned Care – WIC Community Nursing Out of Hours	31 March 2014	Divisional Manager	Complete	3 Action complete
6. Nurses, midwives and care staff have sufficient time to fulfil responsibilities that are additional to their direct caring duties.	Each safe staffing project group is to propose an agreed 'headroom' figure which will be presented to the safe staffing group for approval and the board for sign off. The headroom figure will include: <ul style="list-style-type: none"> • continuous professional development 			Complete	3 Action Complete

	<ul style="list-style-type: none"> time to fulfil mentorship and supervision role <p>This is an expectation of the national guidance.</p> <p>Out of Hours – WIC</p>	31 March 2014	Divisional Manager		3 Action Complete
	<p>The headroom figure will include:</p> <ul style="list-style-type: none"> continuous professional development time to fulfil mentorship and supervision role <p>This is an expectation of the national guidance.</p> <p>Community Nursing</p>	30 May 2014 30 June 2014 30 September 2014	Divisional Manager	Complete	3
	<p>The headroom figure will include:</p> <ul style="list-style-type: none"> continuous professional development 			Complete	3

	<ul style="list-style-type: none"> time to fulfil mentorship and supervision role <p>This is an expectation of the national guidance.</p> <p>Out of Hours</p>	<p>30 June 2014 31 July 2014</p>	Divisional Manager		
7. Boards receive monthly updates on workforce information, and staffing capacity and capability is discussed at a public Board meeting at least every six months on the basis of a full nursing and midwifery establishment review.	<p>Monthly reporting on actual nursing staff on duty against set establishment on a shift by shift basis by team</p> <p>Monthly reporting on actual AHP/Medical staff on duty against set establishment on a shift by shift basis by team</p> <p>Six monthly review of nursing establishments</p> <p>Six monthly review of AHP/Medical staff establishments</p>	<p>Dates to be added when process agreed nationally</p>	Director of Quality and Nursing/ Medical Director		1
			Director of Quality and Nursing/ Medical Director		1
			Director of Quality and Nursing/ Medical Director		1
			Director of Quality and Nursing/ Medical Director		1
8. NHS providers clearly display information about the nurses,	Review of best practice in other community settings and recommendations made to	31 March 2014	Director of Quality and Nursing/ Director of	Attended National Quality Board safe staffing event	3 Action complete

midwives and care staff present on each ward, clinical setting, department or service on each shift.	board		Operations/	on 25 March 2014 Complete	
	Information displayed for nursing teams	Dates to be added when process agreed nationally	Director of Operations	Guidance sort from National Quality Board and NTDA	1
	Information displayed for AHP and Medical teams	Dates to be added when process agreed nationally	Director of Operations	Guidance sort from National Quality Board and NTDA	1
9. Providers of NHS services take an active role in securing staff in line with their workforce requirements.	Workforce plan to be reviewed to ensure it reflects the requirements of the report	31 March 2014 Being presented to Board in July 2014 31/07/2014	Director of Quality and Nursing/ Director of Operations/ Medical Director/ Director of HR and OD	Complete	3
	Nursing staff systems to be reviewed to ensure all staff on duty have the right skills at the right time	31 March 2014 30 May 2014 30/06/2014 30 March 2015 This revised date allows for the introduction of Rotor Master to manage this process	Director of Quality and Nursing/ Director of Operations		2

	Bank and agency systems and process to be reviewed to ensure all staff on duty have the right skills at the right time	31 March 2014	Director of Quality and Nursing/ Director of Operations/	Complete	3 Action Complete
	Nurse recruitment to be reviewed and move to a recruitment for values system – action added to	30 June 2014 Pilot begins 11/08/2014 – 30/09/2014 Three values based questions must be asked as part of the interview process and this should be at the beginning of the interview.	Director of Quality and Nursing/ Director of Operations/ Director of HR and OD	Complete	3 Action Complete
10. Commissioners actively seek assurance that the right people, with the right skills, are in the right place at the right time within the providers with whom they contract.	Copies of board papers to be provided to the commissioners of services after sign off by the board for assurance Submitted and presentation at 1 July contracting meeting	31 October 2014 30 June 2014 Revised to take account of the most recent guidance from the NQB	Director of Quality and Nursing	Complete	3 Action Complete

Appendix 2. Staffing Incidents

Profile of Staffing Incidents: 01 January – 18 November 2014



Staffing Incidents from Jan 2014 by Service


	Jan 2014	Feb 2014	Mar 2014	Apr 2014	May 2014	Jun 2014	Jul 2014	Aug 2014	Sep 2014	Oct 2014	Nov 2014	Total
Community Nursing	2	9	10	3	5	4	6	6	1	0	0	46
Livewell	0	0	0	0	0	0	0	0	1	0	0	1
Physiotherapy and Rehabilitation service	1	0	0	0	0	0	0	0	0	1	0	2
Primary Care Service	0	1	1	0	0	0	1	0	0	0	0	3
Safeguarding	0	0	0	0	0	0	0	0	0	1	0	1
Sexual Health Service	3	3	0	0	0	2	2	2	0	1	2	15
Specialist Nursing Services	0	2	0	0	1	1	0	0	1	0	0	5
Unplanned Care	2	3	0	1	3	4	6	4	3	1	0	27
Total	8	18	11	4	9	11	15	12	6	4	2	100

Staffing Incidents by Service – October 2014

	Physiotherapy and Rehabilitation service	Safeguarding	Sexual Health Service	Unplanned Care	Total
Lack of suitably trained /skilled staff	0	1	1	1	3
Staff raising staffing issues	1	0	0	0	1
Total	1	1	1	1	4

Appendix 3. Community Nursing Right Staffing template

Appendix 3 – Staffing and Bank Fill rate Return

		Fill rate indicator return										Wirral Community  NHS Trust					
Org:		Wirral Community NHS Trust		Staffing: Nursing and Unregistered staff													
Period:		01-31 Dec 2014															
Community Nursing Team Details		Nurse Manager Responsible for Area	Mon - Sun				Bank Required				Mon - Sun		Bank actual Fill Rate				
Team Budget Code	Team name		Leader Name	Manager	Registered nurses	Unregistered Staff	Registered nurses	Unregistered Staff	Average fill rate - registered nurses (%)	Average fill rate - Unregistered staff (%)	Actual fill rate - registered nurses (%)	Actual fill rate - Unregistered staff (%)					
				Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly required Bank staff hours	Total monthly actual bank fill hours	Total monthly required bank staff hours	Total monthly actual bank fill hours						
	St Catherines	DS	SQ	500	400	500	400	100	100	100	100	80.0%	80.0%	100.0%	100.0%		
	Townfield	CG	SQ	800	560	800	560	240	160	240	220	70.0%	70.0%	66.7%	91.7%		
	Paxton	ST	SQ	600	550	600	550	50	20	50	50	91.7%	91.7%	40.0%	100.0%		
	Victoria	PG	SQ	900	750	900	750	150	150	150	100	83.3%	83.3%	100.0%	66.7%		
	Parkfield	BF	SQ	800	700	600	700	100	100	100	80	87.5%	116.7%	100.0%	80.0%		
				3600	2960	3400	2960	640	530	640	550	82.2%	87.1%	82.8%	85.9%		