

## EXECUTIVE REPORT

**QUARTERLY REPORT ON NURSING AND MIDWIFERY STAFFING LEVELS**

Quarter 3 – October to December 2017

**1.0 Summary of Report**

At the Trust we aim to provide safe, high quality care to our patients. Our staffing levels are continually assessed to ensure we meet this aim. Following the investigation into Mid Staffordshire NHS Trust, The Francis report NHS England (NHSE) and NHS Improvements (NHSI) requested that all Trust Boards receive reports on the levels of planned and actual nursing registered and unregistered staff. This is broken down between day and night shifts and includes the planned versus actual staffing levels.

This report provides the Trust Board with information regarding staffing levels for **1<sup>st</sup> October to 31<sup>st</sup> December 2017**.

**Key Points:**

- The Trust has maintained an overall staffing fill rate of above 90%. However we remain challenged in filling registered nurse shifts particularly during the day. Associate Practitioners and Pre-Registration nurses continue to support in the delivery of quality care.
- There has been significant increase in new starters commencing in post from September 2017. This is mainly due to new registrants and overseas nurse recruitment.
- There is on-going collaborative work focusing on new roles to support the existing workforce.
- The new role of the twilight Clinical Site Nurse which commenced in September 2017 has had a positive impact supporting staff and ensuring patient safety remains a priority 'out of hours'.

The following report details the breakdown of average shift fill rates for the Trust, staffing management, vacancies and recruitment activity.

**2.0 Breakdown of average shift fill rates for the Trust**

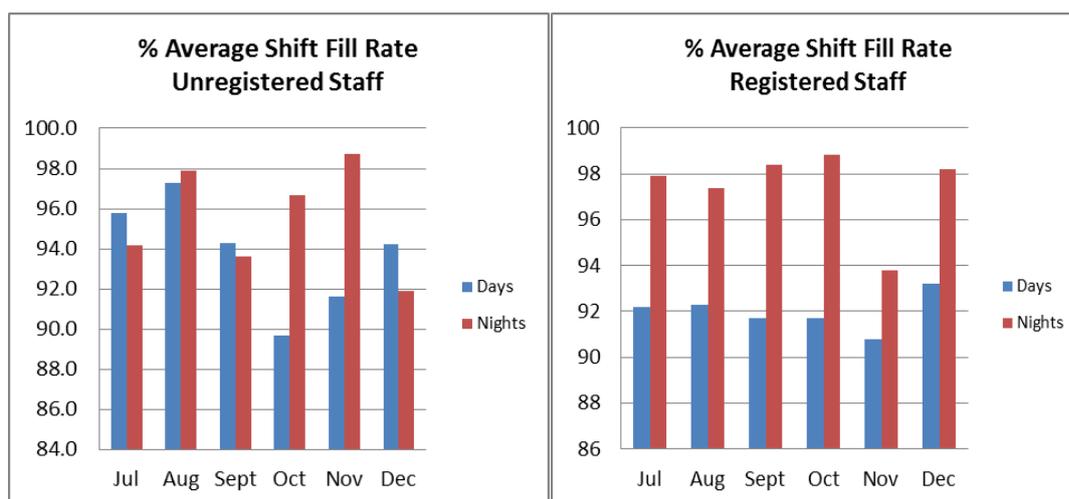
Consistent with performance in previous quarters, shift fill rates for clinical areas across the Trust demonstrate that safe staffing levels for registered and unregistered nurses and midwives has been maintained. Given this information, areas continue to struggle to fill vacant shifts particularly during the day for registered nurses and this becomes a challenge when contingency areas are open and permanent staff are needing to be redeployed from base wards to ensure the safety of our patients.

As per Lord Carter's (2016) recommendations around enhanced care, we have developed a new observation approach (Baywatch) to ensure we have a robust process in place to provide enhanced care (specialling) for our patients. Consistent with quarter 2, we continue to see a rising demand for enhanced care as we see the increase in prevalence of patients

with dementia and that have a Deprivation of Liberty order (DOLs) in place. The Director of Nursing and Midwifery is engaging with the Divisions to review the staffing profile and consider new roles that will provide care and support to this patient group.

**Table 1 AVERAGE SHIFT FILL RATES FOR THE TRUST 2017**

Month	Day %		Night %		Overall average
	Registered	Unregistered	Registered	Unregistered	
Jul	92.2	95.8	97.9	94.2	<b>95.0</b>
Aug	92.3	97.3	97.4	97.9	<b>96.2</b>
Sept	91.7	94.3	98.4	93.6	<b>94.5</b>
Oct	91.7	89.7	98.8	96.7	<b>94.2</b>
Nov	90.8	91.6	93.8	98.7	<b>93.8</b>
Dec	93.2	94.3	98.2	91.9	<b>94.4</b>



### 3.0 Staffing Management

Actions are taken in accordance with the Trust Safe Staffing policy (2016). This dictates the escalation process when shortfalls occur. It also outlines the risk assessments and communication required.

The Trust has in place a number of mechanisms led by the Acting Director of Nursing and Midwifery to ensure the delivery of patient care is safe. Staffing is used flexibly across the wards and clinical areas dependent of acuity of patients and staff skill mix. Multi-professional operational meetings occur throughout the day where patient requirements are reviewed and planned for.

December 2017 has seen one of our most challenging months thus far. This has resulted in up to 5 extra areas opened at short notice. This is consistent with the national picture and locally within our STP group. The national picture shows acute trusts facing similar challenges in the delivery of patient care. At times the increased activity has required all non-

ward based nurses in the hospital to be redeployed to support the delivery of safe care staff. The introduction of the Matrons working late shifts by rota has also provided an added layer of support during the evening.

#### **4.0 Vacancies and recruitment activity**

We maintain our focus on recruitment and retention activities across all bands with plans for 2019 underway. A strategic response to the challenges of retention of staff is being implemented. The Trust continues to attend local schools, university job fairs, Jobcentre careers days and Academy events to promote the diversity that the NHS can offer in careers. We have representation on the Luton Enterprise Advisory Network which allows us to help guide the school's curriculum in order to develop young people who are ready to enter the workforce. In this way we can signpost potential nurses and midwives towards our apprenticeship route. There are also focused weekly meetings to address recruitment as part of the Needs Based Care programme in medicine with events planned in March 2018. We are currently working with our community colleagues to introduce a nursing rotational post between primary and secondary care, as we believe there is an appetite for this innovative post.

We have seen positive results in our International and European recruitment. The staff have been commencing in post across multiple wards in the hospital. We remain challenged by the high IELTS results but recent Nursing and Midwifery Council (NMC) review has now provided an alternative, internationally recognised exam called the Occupational English Test (OET). We are currently exploring the implications of our nurses sitting this exam rather than the IELTSs.

We are proud to state that we maintain a 60% first test pass rate for international nurses completing their objective structure clinical examinations (OSCEs). This is followed by a 96% pass rate on second sitting, with only one nurse not achieving a full pass. We have commenced a new "fast track" OSCE training programme. This enables us to give more intensive training which allows the nurses to be able to sit their first test within 6 weeks. Although we are in early implementation phase of this, we are seeing consistent results compared with the longer length training programme. This means that our nurses are obtaining their NMC registrations as early as 6 weeks after commencing in post.

Recruiting to existing vacancies remains a challenge. This is consistent with the national picture. Multiple initiatives are in place to retain staff including face to face leaver interviews and offers of rotation to other areas in the hospital. Careers hubs are being introduced in order to offer advice and support to staff. We hope that this will go some way to increasing our retention rate – particularly in relation to our HCAs.

#### **5.0 Action required**

- The Board is asked to note the content of the report
- Be assured that there is the appropriate level of detail and assessment in reviewing the staffing across inpatient wards

**Sheran Oke**  
**Director of Nursing and Midwifery (Acting)**