NURSE SAFER STAFFING REPORT JANUARY 2025

Meeting date: 27th January 2025

Reporting to: People Committee / Board

Agenda item No:

Report authors:

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Action required:
Information

Delegation status (Board only):
Jointly delegated item to Group Board

Previously presented to:
n/a

NTHFT strategic objectives supported:

Putting patients first ☒

Valuing our people ☒

Transforming our services ☐

Health and wellbeing ☐

STHFT strategic objectives supported:

Best for safe, clinically effective care and experience ☒

A great place to work ☒

A centre of excellence, for core and specialist services, research, digitally supported healthcare, education and innovation in the Northeast of England, North Yorkshire and beyond ☐

Deliver care without boundaries in collaboration with our health and social care partner's ☒

Make best use of our resources ☒

CQC domain link:

Well-led

Board assurance / risk register this paper relates to

Caring Better Together

5.1 Failure to deliver sustainable services due to gaps in establishment, due to ability to recruit.

Key discussion points and matters to be escalated from the meeting

ALERT: Alert to the matters that require the board's attention or action, e.g. non-compliance, safety or a threat to the Trust's strategy.

Ability to attract and retain good staff resulting in critical workforce gaps in some clinical services and impact on use of resources.

Failure to have effective nursing workforce plans that anticipate and prevent shortages arising from retirements, shortfalls in all recruitment and retention plans.

ADVISE: Advise of areas of ongoing monitoring or development or where there is negative assurance. What risks were discussed and were any new risks identified.

This report details nursing staffing levels for September 2024 to November 2024 for inpatient wards. The report provides assurance that arrangements are in place to staff services with the right skills in the right place to provide safe, sustainable and productive staffing. Daily Safe Care Safer Staffing meetings provide assurance that inpatient areas have been assessed from a staffing perspective.

This assessment is based on skill mix, acuity, and occupancy levels, and all actions agreed by Safe Care Chair and escalated to Senior Nurses as required.

At North Tees the overall planned nurse fill is 100% which appears to demonstrate a good compliance with safer staffing. However, further examination of this data confirms that this due to a reduced fill rate in the RN line due to sickness and maternity leave and an over fill in the HCSW line due to increasing enhanced care requirements. In summary, despite a Trust wide compliance of 100%, there remains a continued reliance on temporary staffing for both RN and HCSW.

ASSURE: Assure Inform the board where positive assurance has been achieved, share any practice, innovation or action that the committee considers to be outstanding.

The percentage of shifts filled against the planned nurse staffing across South Tees from September to November 24 has decreased slightly to 97.1%. This demonstrates a good compliance with safer staffing.

Nursing Turnover between September 24 and November 24 has decreased to 6.13% at South Tees (Appendix 1) and at North Tees the monthly turnover for Registered Nursing in November 2024 is 0.37% and for HCSW is 0.6%.

Recommendations:

Members of the Trust Board are asked to: Note the content of this report and to note the significant work to ensure safe staffing across the nursing and midwifery workforce throughout September 2024 to November 2024.

Nurse Safer Staffing Report
January 2025

This exception report provides the People Committee with the monthly, Group wide, nursing safer staffing position across all in patient areas. The report provides the People Committee with the assurance that arrangements are in place to staff services with the right skills in the right place to provide safe, sustainable and productive staffing.

1. Safer Staffing Governance

At University Hospitals Tees, Safer Staffing is maintained through twice daily safer staffing meetings (using SafeCare Live) to address any immediate safer staffing concerns (on the day) and to ensure that suitable safer staffing arrangements are in place in line with patient acuity and dependency levels. Staff redeployment is co-ordinated to ensure patient safety is prioritised and at the forefront of decision making in line with the agreed SOP's. All staffing plans are shared through OPEL meetings and SafeCare meetings.

Across the Group, all elements of safer staffing are reviewed at the site led workforce group meetings. Any unresolved concerns are escalated to the Tactical and Strategic Group and Site Leadership Team as required. Both sites undertake a look forward exercise to the week ahead, to ensure that a plan is in place to support any gaps in the nursing workforce. The monthly collaborative assurance meetings at both sites have full participation from all senior nurses including Heads of Nursing, Clinical Matrons and Service Managers to ensure all decision making is appropriate.

Monthly workforce assurance - check and challenge meetings are now embedded in practice to ensure compliance with rostering and safer staffing key performance indicators.

Table 1a and Table 1b show overall planned versus actual fill across the group. Any areas showing less than 80% for registered nurses are highlighted and rationale provided as to why this has occurred.

The following areas at South Tees, across September 2024, October 2024 and November 2024 showed a fill rate of less than 80% due to patient acuity levels, staff sickness and elective lists

- Short Stay Elective Surgery, Gara, Ward 21 Ward 22, Neonatal Unit, CICU, Cardio HDU, Zetland and Maternity Centre FHN.
- In November, the opening of 8 winter beds has required additional staffing. This has been achieved with a healthy fill rate which has provided backfill for staff who have been redeployed.

The following areas at North Tees, across September 2024, October 2024 and November 2024, showed a fill rate of less than 80%.

- Ward 22 in September 2024 when RM fill reduced to approx. 79% due to sickness. During this period, patient acuity levels were assessed and if additional RMs were required this was managed via agreed escalation plans with both Delivery and Community teams.

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- Ward 4 in September 2024 (Elective care hub) when HCSW fill reduced to 79.4% during daytime, this was reflective of activity levels and patient acuity at the time.
- In October 2024 wards 37 and 41 had high fill levels in the HCSW line (approx. 140-150%) due to an increased enhanced care demand in both areas.
- During October 2024 and November 2024 there were staffing pressures across multiple areas due to unplanned short sickness levels in the RM, RN and HCSW staff groups. Areas included ward 22 and Delivery suite, Elective Care, SDU and wards 26, 36 and 37. All gaps in rosters were discussed in detail at the daily safer staffing meetings and suitable staff redeployment or escalation to additional bank and agency were carried out.

Table 1a Trust Planned versus Actual fill – South Tees

		September 24	October 24	November 24
Overall Ward Fill Rate	RN/RMs (%) Average fill rate - DAYS	88.3%	90.0%	90.3%
	HCA (%) Average fill rate - DAYS	93.4%	92.5%	89.9%
	NA (%) Average fill rate - DAYS	100%	100%	100%
	SNA (%) Average fill rate - DAYS	100%	100%	100%
	RN/RMs (%) Average fill rate - NIGHTS	93.1%	95.7%	95.2%
	HCA (%) Average fill rate - NIGHTS	106.2%	105.6%	101.2%
	NA (%) Average fill rate - NIGHTS	100%	100%	100%
	SNA (%) Average fill rate - NIGHTS	100%	100%	100%
	Total % of Overall planned hours	**97.6%**	**98.0%**	**97.1%**

Table 1b Trust Planned versus Actual fill – North Tees and Hartlepool

		September 24	October 24	November 24
Overall Ward Fill Rate	RN/RMs (%) Average fill rate - DAYS	88%	84%	86%
	HCA (%) Average fill rate - DAYS	103%	102%	102%
	NA (%) Average fill rate - DAYS	100%	100%	100%
	SNA (%) Average fill rate - DAYS	100%	100%	100%
	RN/RMs (%) Average fill rate - NIGHTS	94%	95%	95%
	HCA (%) Average fill rate - NIGHTS	120%	121%	121%
	NA (%) Average fill rate - NIGHTS	100%	100%	100%
	SNA (%) Average fill rate - NIGHTS	100%	100%	100%
	Total % of Overall planned hours	**101%**	**100%**	**100%**

Percentage of overtime for inpatient areas for all staff groups including AHP's, Midwifery and Administration and Clerical has decreased year on year since 2021. The current overtime percentage based on the NHSP vs Overtime report is 4.1% but is lower compared to last year's 5.6% in November.

This data is not usually reported at North Tees and Hartlepool but over time use is presented and discussed at the monthly Temporary Staffing Focus Group. For future reports (from February 2025) this data will be presented to identify overtime use and any associated increase or decrease in use across the MDTs.

2. Nurse Sensitive Indicators

No staffing factors were directly identified as part of any PSIRF review across both South Tees or North Tees and Hartlepool in November 24. Although distractions related to activity in areas has been highlighted as a theme in one of the reviews.

3. Red Flags Raised through Safe Care Live

At South Tees, between September 2024 and November 2024 there were a total of 8 red flags raised relating to staffing. The themes identified are Shortfall in RN time (6) and less than 2 RN's on shift (2). For red flags indicating less than 2 RN's, the Safe Care log provides a documented resolution. Therefore, no shifts had less than 2 RNs throughout November. Reminders are sent weekly via the E-Rostering team to Matrons to review and close any resolved Red Flags.

At North Tees, between September 2024 and November 2024, there were a total of 24 red flags raised were. Flags were raised predominately by Critical Care, Emergency Assessment and ward 40 in anticipation of or confirmed shortfall in RN time. The staffing levels across all areas were reviewed at the safer staffing meeting on these days and following review of patient acuity and dependency in the areas at the time.

To safely manage the shortfalls, Ward Matrons and Senior Clinical Matrons worked clinically within the teams and following further staff redeployment there was no further escalation and the red flags were closed down. It was not specified at the time of reporting that the flags raised by Critical Care were due to non-compliance with GPICs guidance. However, it is important to note that currently the Ward Matron on ward 40 is regularly needing to work clinically which significantly impacts her ability to protect management time.

4. Datix/In-Phase Submissions

At South Tees between September 24 and November 24, there were 182 Datix submissions relating to staffing. The majority of Datix submissions, highlights staff shortages in Therapeutic Care, ED, Ward 9, Hambleton Northallerton PCN, Critical Care Outreach and Ward 7. All shortages raised were managed through the SafeCare process. Redeployment took place and revised community schedules supported safe staffing were activated. There was reduced Critical Care Outreach cover – risk was mitigated by the Critical Care registrar covering the bleep and by enacting the escalation plan at the FHN.

At North Tees, between September 2024 and November 2024 there were a total of 10 In-Phase reports submitted by the Care Groups in relation to either safe staffing concerns or skill mix concerns. All In-Phase reports were discussed in the safer staffing meetings to ensure Senior Clinical Matrons are fully sighted on the reporting and can make safe staffing decisions based on the concerns raised by clinical teams.

The Nursing Workforce Team continues to work closely with HR senior team and the temporary staffing providers (NHSP) to improve fill rates and maintain safe staffing.

5. Vacancy & Turnover

Across the group, the vacancy position continues to be positive. Both sites have been successful with recruitment and continue to evolve plans to support and future proof the nursing workforce. The ongoing development of staff including investing in health care support workers, trainee nurse associates is supporting the recruitment and retention of the nursing workforce.

At South Tees RN vacancies fluctuate between zero and three for Band 5 RN's. There is an expectation that this position will continue into Q1 of 2025.

At North Tees, the band 5 RN vacancy position for November 2024 reports a 25.21wte vacancy with appointments already in place from January 2025 following the recruitment of the January 2025 cohort from both Teesside and Sunderland Universities. Further forecasting to the end January 2024 sees the B5 RN vacancy position move to an over established position of approx. +6.58wte which is planned to reduce following natural RN turnover throughout Jan/Feb 2025.

At North Tees, the HCSW vacancy position, equally, has a positive trajectory and is forecasting a vacancy position of 7.7 WTE in January 2025. Recruitment centres to continue to appoint into HCSW vacancy are planned for 2025 and adverts are scheduled for release from 20th December 2024 in advanced of the next centre in January 2025.

6. Care Hours Per Patient Day (CHPPD)

CHPPD is rolling data updated monthly, to show staffing levels in relation to patient numbers on an inpatient ward. This relates to the associated variance between the required care hours to safely care for patients and the actual care hours delivered by individual ward nursing workforce models. Table 2 and table 3 show the overall average CHPPD for the group. Most recent breakdown by ward (November) can be reviewed in Appendix 2.

Table 2 South Tees site

	Required CHPPD (Average)	**Actual CHPPD (Average)**	**Variance**
September 2024	8.90	9.25	+0.35
October 2024	8.73	8.48	-0.25
November 2024	8.97	8.66	-0.31

November shows that 19 inpatient areas that are above the required average of CHPPD provision (>1)
The sickness absence rate and vacancy position at South Tees (whilst awaiting the cohort of newly qualified nurses) does mirror this deficit in CHPPD.
Twice daily safe care reviews plan and implement redeployment into unfilled shifts
Temporary nurse staffing initiatives continue at South Tees and are managed via safecare and Nurse workforce lead and all are reviewed weekly. The initiatives in place are to support and fill critical shifts due to November sickness rate of 6.12 %. Due to the changing demands temporary staffing is a movable figure as through safe care all efforts are made to redeploy before exploring NHSP. A weekly review and monthly assurance review of all wards and departments that use temporary staffing is part of a triangulation review with sickness and turnover all which link to the biannual SNCT establishment reviews

Table 3 North Tees site

	Required CHPPD (Average)	Actual CHPPD (Average)	Variance
September 2024	8.61	9.38	+0.77
October 2024	8.45	8.96	+0.54
November 2024	8.76	8.20	-0.56

In November the areas highlighting a higher variance level (>1) and thus, not delivering the required CHPPD were wards 25, 40 and 42. This is reflective of the current sickness and absence levels and the vacancy positions at the time of reporting. All unfilled duties within rosters have been managed via the twice daily safer staffing meetings and suitable re-deployment to the areas made. The use of temporary nurse staffing continues at North Tees due to sickness levels that exceed 4% (allocated within headroom) and maternity leave that is not backfilled consistently. The highest users of temporary staffing currently are the Emergency assessment Unit and wards 26, 27, 40 and 42. A full review of all wards and departments temporary staffing use, with full triangulation with sickness and turnover is now being prepared as part of the bi-annual nurse establishment review.

7. Nurse Recruitment and Retention

Nurse recruitment and vacancy fill remains healthy across the group. Both sites have recruited predominantly from the cohorts of newly qualified nurses from Teesside University, Sunderland University and York University. Over establishment with newly qualified nurses at South Tees has created a ready to go workforce that will support turnover and future proof the nursing workforce.

Currently North Tees is not in an over recruitment RN position which will create an increasing vacancy position month on month as natural turnover occurs. Recruitment centres are scheduled bi-monthly where successful candidates are currently being pooled to await a vacancy. If successful candidates sit in a pool too long there is a risk that they will withdraw and move to another Trust.

At both sites, the allocation of all pre-registered nurses who are due to qualify in January 2025 is now complete. The newly qualified nurses have regular KIT sessions in place to support positive on-boarding prior to them taking up their positions and starting preceptorship.

Safer Staffing workforce initiatives continue to be implemented. At both sites the monthly nursing workforce assurance meetings provide a platform to fully explore all recruitment and retention issues as well as highlighting best practice for safe and effective rostering.

8. Key Priorities

At North Tees the current key priorities are as follows:

- Continued monitoring of temporary staffing use, sickness/absence and turnover.
- SNCT data collection in Jan/Feb 2025 - Adult and Children and Young People Emergency Departments (ED and CYPED)
- Continued review of site level compliance with Guidelines for the Provision of Intensive Care Services (GPICS)

- Ongoing forecasting of RN turnover to propose an element of RN over-recruitment to support vacancy position month on month in 2025/26, in line with South Tees.

At South Tees the current key priorities are as follows:

- Continuation of monthly collaborative assurance rounds to review all staffing issues including temporary staffing initiative
- Revision of SNCT process to improve compliance and accuracy for February 2025 data collection
- Service improvement projects including annual leave cleanse and review of additional duty request.
- Launch of workforce assurance dashboard in collaboration with CIP and BIU
- Ongoing review of establishment and deployment of newly qualified nurses into permanent posts in light with turnover

9. RECOMMENDATIONS

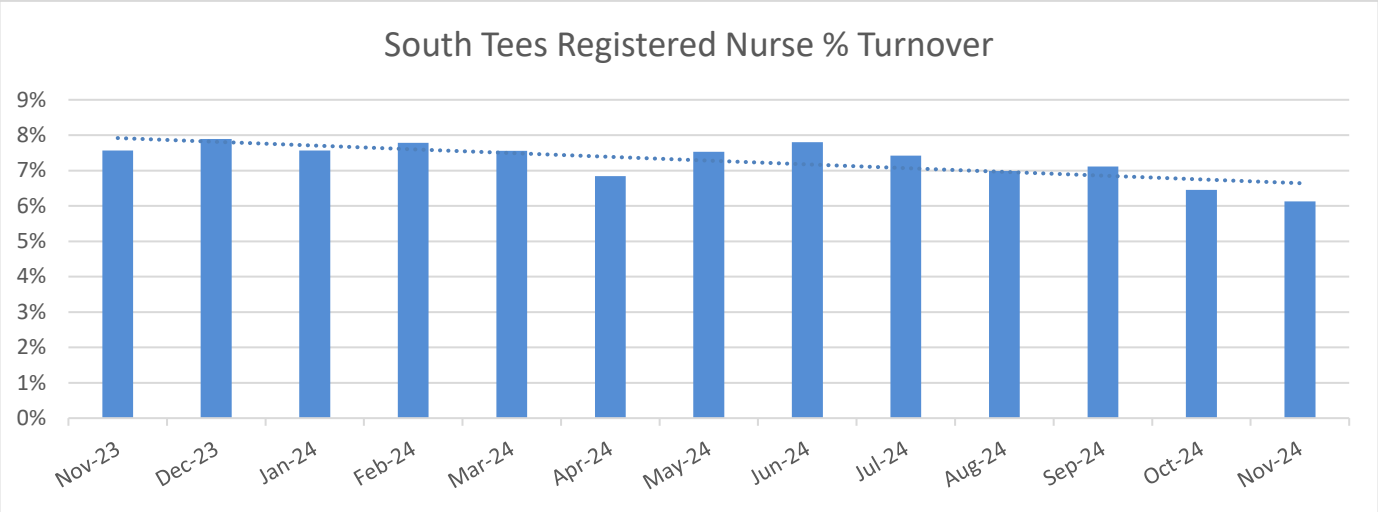
The Board is asked to read the content of this report and to note the progress made across both sites in relation to developing and retaining the nursing workforce.

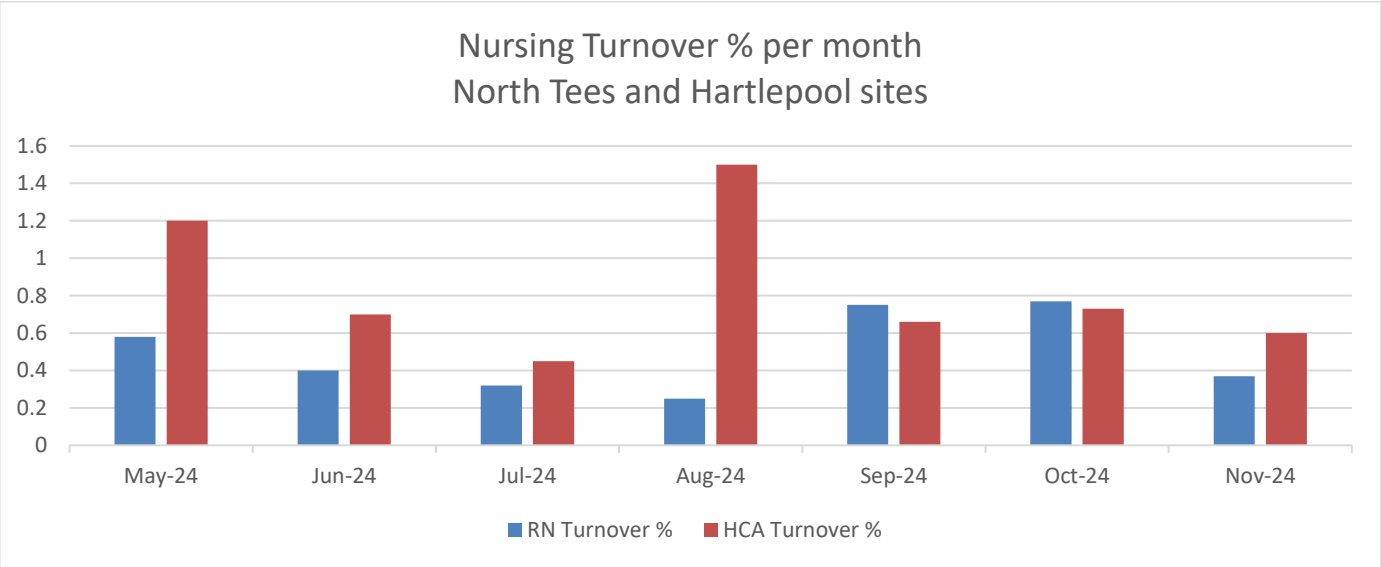
The Board are asked to note the assurance presented that arrangements are in place to monitor, support and mitigate any impact of reduced staffing levels or skill mix in relation to patient safety.

The Board are asked to acknowledge the development of this report in the coming months to ensure that the two current reporting methods across both site teams continue to align. This will provide the continued assurance that arrangements are in place to staff services with the right skills in in the right place to provide safe, sustainable and productive staffing.

Appendix 1

Nursing Turnover November 23 - November 24





Appendix 2

South Tees Average CHPPD Breakdown by Ward (November 2024):

Ward	Average of Required CHPPD	Average of Actual CHPPD	Variance
Ward 1	8.77	8.22	-0.55
Ward 31	8.78	6.75	-2.04
Ward 2	6.50	5.65	-0.85
Ward 3	7.54	5.30	-2.25
Ward 4	8.58	6.51	-2.07
Short Stay Elective Surgery	5.17	5.37	0.20
Ward 6	5.85	5.21	-0.64
Ward 7	6.00	4.82	-1.19
Ward 8	5.50	4.87	-0.62
Ward 9	8.52	3.76	-4.75
Ward 11	8.30	6.97	-1.33
Ward 12	9.67	6.79	-2.88
Ward 14	6.42	5.58	-0.83
Ward 24	7.32	7.15	-0.17
Ward 25	10.07	7.02	-3.05
Ward 26	11.54	8.36	-3.18
Ward 27	5.76	10.68	4.92
Ward 28	8.58	6.00	-2.59
Ward 29	5.27	4.59	-0.69
Cardio MB	6.20	7.08	0.89
Ward 32	6.14	6.32	0.18
Ward 33	7.43	6.38	-1.05
Ward 34	8.28	6.92	-1.37
Ward 35	7.86	7.29	-0.57
Ward 36	6.07	5.53	-0.54
Ward 37 - AMU	11.02	8.89	-2.13
Spinal Injuries	9.39	6.57	-2.82
CCU	15.58	11.20	-4.37
Critical Care	18.85	26.67	7.82
CICU JCUH	22.77	30.68	7.91
Cardio HDU	11.41	14.78	3.37
Ward 24 HDU	10.10	19.92	9.82
CDU FHN	8.36	6.69	-1.67
Ainderby FHN	9.20	6.65	-2.55
Romanby FHN	7.00	6.62	-0.38
Gara FHN	6.01	10.75	4.74
Rutson FHN	8.28	7.34	-0.94
Friary	8.19	8.16	-0.03
Zetland Ward	8.87	7.65	-1.21
Tocketts Ward	7.83	6.40	-1.43
Ward 21	8.88	8.54	-0.35

Ward 22	12.65	10.87	-1.78
Neonatal Unit (NNU)	9.45	8.32	-1.13
Paediatric Critical Care (PCCU)	14.54	15.23	0.69
Grand Total (Average)	**8.97**	**8.66**	**-0.31**

North Tees Site - CHPPD by ward for November 2024

Row Labels	Average of Required CHPPD	Average of Actual CHPPD	Variance
Acute Cardiology Unit	7.14	5.35	-1.78
Critical Care North Tees	21.04	24.02	2.98
Elective Care Unit	5.73	13.28	7.54
Emergency AMB	7.31	8.63	1.33
Neonatal Unit	10.69	8.67	-2.02
Paediatrics	10.18	9.28	-0.90
SDU	11.05	9.44	-1.62
Ward 24 (Respiratory)	7.86	6.18	-1.68
Ward 24 RSU	10.63	9.91	-0.72
Ward 25 (Respiratory)	7.93	5.87	-2.06
Ward 25 RSU	11.04	9.77	-1.26
Ward 26	7.04	5.57	-1.47
Ward 27 (Gastroenterology)	7.07	6.18	-0.89
Ward 28 (Surgery)	6.35	6.08	-0.28
Ward 31 (Surgical Observation Unit)	8.41	8.06	-0.35
Ward 32 (Fragility Fracture)	8.42	7.54	-0.88
Ward 33 (Orthopaedic & Spinal)	6.43	5.97	-0.46
Ward 36	8.34	6.19	-2.14
Ward 37 (Resilience)	6.92	6.57	-0.35
Ward 38	6.64	5.77	-0.87
Ward 40 (Acute Elderly)	9.18	7.08	-2.11
Ward 41 (Stroke Unit)	7.82	6.12	-1.70
Ward 42 (Elderly Rehabilitation)	8.27	7.05	-1.22
Grand Total	**8.76**	**8.20**	**-0.56**