

SAFE STAFFING REPORT 2024

Meeting date:

Reporting to: People Committee / Board

Agenda item No:

Report author: Debi McKeown, Workforce Lead, Lindsay Garcia, Director of Nursing, South Tees

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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 partners

Make best use of our resources

CQC domain link:

Well-led

Board assurance / risk register this paper relates to:

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.

Threat - 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 May – August 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.

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 the South Tees from May to August 24 has increased to 98.1% at South Tees and 97.9% at North Tees, as per Table 1a demonstrating continued good compliance with safer staffing.

Nursing Turnover between May and August 24 has decreased to 6.99% at South Tees (Appendix 1) and at North Tees the monthly turnover for Registered Nursing is currently 0.23% and for HCSW is 1.5%.

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 May 2024 to August 2024.

Nursing Workforce Exception Report November 2024

This exception report provides the People Committee, Resource Committee and Board with the bi-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 Safe Care Live) to address any immediate safer staffing concerns (on the day) and to ensure that suitable safer staffing arrangements are in place.

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 collaborative assurance meetings have full participation from all senior nurses including Heads of Nursing, Clinical Matrons and Ward Managers/matrons to ensure all decision making is appropriate. 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 communication plans in relation to staffing are shared with the site team via OPEL meetings 3 times per day.

Monthly workforce assurance - check and challenge meetings are now embedded in practice. These meetings include all relevant nursing colleagues and service managers.

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.

Between May and August, the following inpatient areas at South Tees showed a fill rate of less than 80% due to sickness:

- Ward 5, Ward 22, CICU, Ward 7, Neonatal Unit and Paediatric Critical Care
- During these months, Ward 5 also relocated to Ward 10 which saw a reduced bed base and their staffing model was adjusted to reflect this.

The following areas at North Tees showed a fill rate of less than 80%;

- Delivery suite – due to sickness and high occupancy in Aug 24, as a result community team members were redeployed to the area to assure safe staffing levels, as per planned internal escalation plans.
- Ward 26 (gastroenterology), this is due to current vacancy position and sickness levels, staff redeployed safely from other wards within the Care Group.

Table 1a Trust Planned versus Actual fill – South Tees

Overall Ward Fill Rate		May 24	June 24	July 24	August 24
	RN/RMs (%) Average fill rate - DAYS	91.1%	91.5%	90.0%	89.4%
	HCA (%) Average fill rate - DAYS	91.4%	90.8%	91.8%	93.1%
	NA (%) Average fill rate - DAYS	100%	100.0%	100.0%	100%
	SNA (%) Average fill rate - DAYS	100%	100.0%	100.0%	100%
	RN/RMs (%) Average fill rate - NIGHTS	96.4%	94.9%	93.7%	95.1%
	HCA (%) Average fill rate - NIGHTS	109.2%	110.1%	107.1%	107.1%
	NA (%) Average fill rate - NIGHTS	100%	100.0%	100.0%	100%
	SNA (%) Average fill rate - NIGHTS	100%	100.0%	100.0%	100%
	Total % of Overall planned hours	98.5%	98.4%	97.8%	98.1%

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

Overall Ward Fill Rate		May 24	June 24	July 24	August 24
	RN/RMs (%) Average fill rate - DAYS	91%	92%	90%	87%
	HCA (%) Average fill rate - DAYS	87%	88%	89%	95%
	NA (%) Average fill rate - DAYS	100%	100%	100%	100%
	SNA (%) Average fill rate - DAYS	100%	100%	100%	100%
	RN/RMs (%) Average fill rate - NIGHTS	99%	98%	98%	93%
	HCA (%) Average fill rate - NIGHTS	104%	105%	112%	108%
	NA (%) Average fill rate - NIGHTS	100%	100%	100%	100%
	SNA (%) Average fill rate - NIGHTS	100%	100%	100%	100%
	Total % of Overall planned hours	98%	98%	99%	97.9%

Percentage of overtime for inpatient areas for all staff groups including AHPS, Midwifery and Administration and Clerical has decreased year on year since 2021. The current overtime percentage based on the NHSP vs Overtime report has remained static at 6% but is still lower compared to last year's 8% in May.

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 this data will be presented to identify overtime use and any associated increase or decrease in use across the MDTs. @GARCIA, Lindsay (SOUTH TEES HOSPITALS NHS FOUNDATION TRUST) @SWANSON, Elizabeth (SOUTH TEES HOSPITALS NHS FOUNDATION TRUST)

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 May 24. Although distractions related to activity in areas has been highlighted as a theme in one of the reviews. @GARCIA, Lindsay (SOUTH TEES HOSPITALS NHS FOUNDATION TRUST) @SWANSON, Elizabeth (SOUTH TEES HOSPITALS NHS FOUNDATION TRUST)

3. Red Flags Raised through Safe Care Live

At South Tees, between May and August 24, the total number of red flags relating to staffing is 24. The themes identified are Shortfall in RN time (22) 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 May and August. Reminders are sent weekly via the E-Rostering team to Matrons to review and close any resolved Red Flags.

At North Tees, between May and August 24, there were a total of 2 red flags raised in June 2023, both were from the critical care unit in anticipation of a shortfall in RN time. The staffing levels in Critical Care were discussed at the safer staffing meeting on these days and following review of patient acuity and dependency in the unit at the time, the availability of the Unit Matron and Clinical education, there was no further escalation following both red flag raises. Therefore, the red flags were closed down. It was not specified at the time of reporting that these flags were raised due to non-compliance with GPCs guidance.

4. Datix/In-Phase Submissions

At South Tees between May and August 24, there were 220 Datix submissions relating to staffing. The majority of Datix submissions, highlights staff shortages in Critical Care Outreach, ED, Ward 9, Hambleton Northallerton PCN and Ward 3. All shortages raised were managed through the Safecare process. Redeployment took place and revised community schedules supported safe staffing were activated. There were occasions whereby **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 May24 and Aug24 there were a total of 5 In-Phase reports submitted from the in-patient wards in relation to either safe staffing concerns or skill mix concerns. All In-Phase reports are discussed in the safer staffing meetings to ensure Senior Clinical Matrons are fully sighted on the reporting and are able to 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. @GARCIA, Lindsay (SOUTH TEES HOSPITALS NHS FOUNDATION TRUST) @SWANSON, Elizabeth (SOUTH TEES HOSPITALS NHS FOUNDATION TRUST)

At South Tees RN vacancies sit at 5. Agreement has been gained through SLT to recruit NQNs from the January cohort based on predicted turnover and future developments. Currently South Tees have 12 HCSW vacancies.

At North Tees, the band 5 RN vacancy position has continued to reduce in line with the planned trajectory. The position for August 2024 reports a 12wte vacancy with plans to appoint into this in January 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. 1wte which accounts for planned turnover throughout November and December 2024 and the appointment of approx. 25wte pre-registration nurses.

At North Tees, the HCSW vacancy position, equally, has a positive trajectory and is forecasting an appointed position in January 2025.

At North Tees the monthly turnover in August 2024 for Registered Nursing is 0.23% and for HCSW is 1.5%. Appendix 1 shows the monthly turnover break down where RN turnover is reducing month on month, whilst HCA turnover has increase in August 2024.

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 (August) can be reviewed in Appendix 2.

Table 2 South Tees site

	Required CHPPD (Average)	Actual CHPPD (Average)	Variance
May 2024	9.17	9.00	-0.17
June 2024	9.11	9.22	+0.11
July 2024	8.95	9.30	+0.35
August 2024	9.06	10.23	+1.17

Table 3 North Tees site

	Required CHPPD (Average)	Actual CHPPD (Average)	Variance
May 2024	8.63	8.51	-0.12
June 2024	8.57	8.86	+0.19
July 2024	7.52	7.77	+0.26
August 2024	8.58	10.36	+1.78

In August 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. Despite the variance reported, these wards did not require further escalation during the month of August.

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 has created a ready to go workforce that will support turnover and future proof the nursing workforce. Whilst South Tees has now completed all international nurse recruitment, North Tees remains ongoing with internationally trained midwives.

At North Tees the allocation of all pre-registered nurses who are due to qualify in September 2024 is now complete. Work remains on-going to plan for the recruitment of the January

2025 cohorts of newly qualified nurses. The September nurses continue to attend regular KIT sessions to support positive on-boarding prior to them taking up their positions and starting preceptorship.

Safer Staffing workforce initiatives continue to be implemented. Within South Tees the newly established monthly nursing workforce assurance meetings provides a platform to fully explore all recruitment and retention issues as well as highlighting best practice for safe and effective rostering.

At North Tees the check and challenge meetings are becoming well embedded and support the monthly monitoring of workforce models to ensure they remain fit for purpose. The meetings also enable a review of rostering KPIs, vacancy and turnover positions with SCMs, Ward Matrons and the wider Care Group SMTs.

8. RECOMMENDATIONS

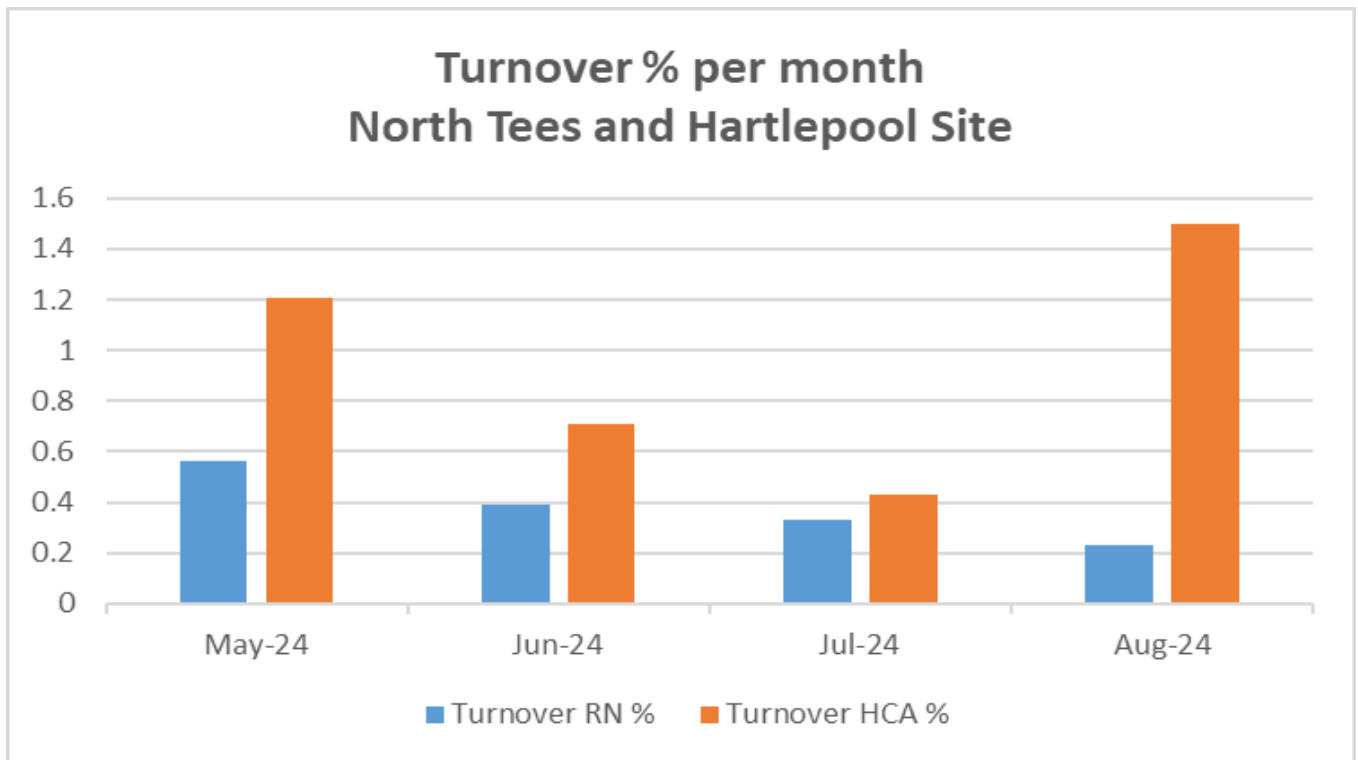
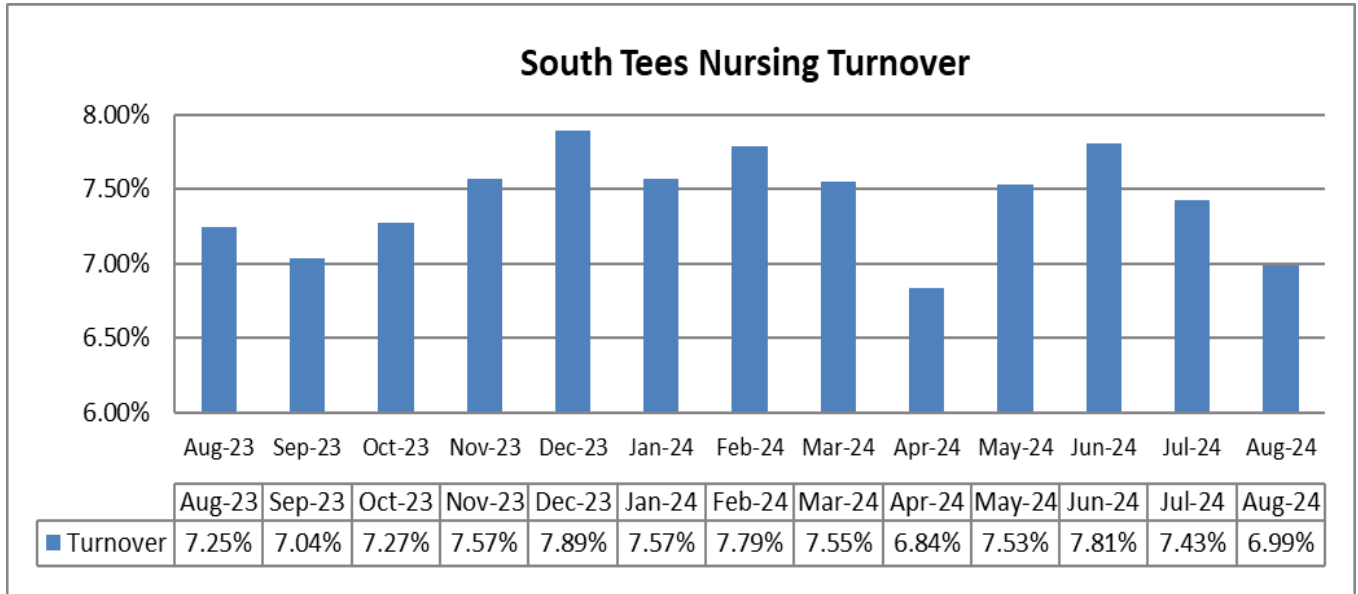
The Board is asked to read the content of this report and to note the progress made across both sites in relation to developing and retaining the nursing workforce.

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 August 23 - August 24



Appendix 2

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

Ward	Average of Required CHPPD	Average of Actual CHPPD	Variance
Ward 1	9.50	10.58	+1.08
Ward 31	8.79	7.16	-1.62
Ward 2	5.15	5.71	+0.56
Ward 3	8.03	5.98	-2.05
Ward 4	8.55	6.90	-1.66
Ward 5	4.90	5.21	+0.31
Ward 6	5.81	5.73	-0.08
Ward 7	5.30	4.81	-0.50
Ward 8	4.25	4.07	-0.18
Ward 9	8.87	4.15	-4.72
Ward 11	8.23	7.27	-0.96
Ward 12	9.08	7.04	-2.04
Ward 14	6.20	5.63	-0.56
Ward 24	7.48	8.17	+0.69
Ward 25	9.40	7.39	-2.01
Ward 26	9.22	7.08	-2.14
Ward 27	6.46	13.30	+6.84
Ward 28	8.41	7.43	-0.98
Ward 29	5.86	5.71	-0.15
Cardio MB	5.67	7.16	+1.49
Ward 32	6.80	6.63	-0.17
Ward 33	8.22	6.11	-2.11
Ward 34	8.05	6.56	-1.49
Ward 35	8.55	8.92	+0.38
Ward 36	4.15	3.52	-0.63
Ward 37 - AMU	10.99	10.79	-0.20
Spinal Injuries	13.06	7.39	-5.6
CCU	15.57	12.82	-2.75
Critical Care	19.62	26.43	+6.81
CICU JCUH	24.43	30.37	+5.94
Cardio HDU	10.60	15.61	+5.01
Ward 24 HDU	10.45	23.20	+12.75
CDU FHN	8.19	8.88	+0.68
Ainderby FHN	7.67	7.84	+0.17
Romanby FHN	7.41	8.06	+0.64
Gara FHN	6.64	15.15	+8.50
Rutson FHN	7.65	7.13	-0.52
Friary	8.36	12.31	+3.95
Zetland Ward	8.72	7.55	-1.17
Tocketts Ward	7.97	7.60	-0.37
Ward 21	8.93	13.35	+4.42
Ward 22	14.21	15.25	+1.04

Neonatal Unit (NNU)	10.64	14.36	+3.72
Paediatric Critical Care (PCCU)	16.47	37.66	+21.19
Grand Total (Average)	9.06	10.23	+1.17

North Tees Site - CHPPD by ward for August 2024

Row Labels	Average of Required CHPPD	Average of Actual CHPPD	Variance
Acute Cardiology Unit	6.85	6.15	-0.69
Critical Care North Tees	20.83	27.54	6.70
Elective Care Unit	6.36	16.60	10.23
Emergency AMB	7.03	9.91	2.89
Neonatal Unit	11.09	31.01	19.92
Paediatrics	9.92	17.61	7.68
SDU	12.01	12.02	0.01
Ward 24 (Respiratory)	7.47	5.98	-1.49
Ward 24 RSU	9.73	9.88	0.15
Ward 25 (Respiratory)	7.29	5.28	-2.01
Ward 25 RSU	10.33	10.24	-0.09
Ward 26	6.48	5.74	-0.74
Ward 27 (Gastroenterology)	6.55	6.33	-0.21
Ward 28 (Surgery)	5.81	5.84	0.03
Ward 31 (Surgical Observation Unit)	8.35	9.44	1.09
Ward 32 (Fragility Fracture)	8.23	8.80	0.57
Ward 33 (Orthopaedic & Spinal)	6.25	6.06	-0.19
Ward 36	7.66	6.74	-0.92
Ward 38	6.41	6.03	-0.38
Ward 40 (Acutev Elderly)	8.43	7.31	-1.12
Ward 41 (Stroke Unit)	7.85	6.88	-0.98
Ward 42 (Elderly Rehabilitation)	7.75	6.54	-1.21
Grand Total (Average)	8.58	10.36	1.78