

<b>REPORT TO THE SENIOR MANAGEMENT COMMITTEE</b>	
<b>Date</b>	
<b>Agenda Item</b>	
<b>Title</b>	Safer Staffing Monthly Exception Report March 2019 (February 2019 data)
<b>Author(s)</b>	Sara Courtney – Deputy Director of Nursing and Clinical Lead for Quality Improvement
<b>Sponsoring Director</b>	Paula Hull – Director of Nursing and Allied Health Professionals

<b>Purpose &amp; Action Required</b>	<p>The purpose of this report is to provide the monthly exception report for March 2019 (February 2019 data) in relation to data submission for Safer Staffing.</p> <p>The Senior Management Committee is requested to receive the exception report Safer Staffing for March 2019 and to recommend any escalations for inclusion in Trust Board report.</p>
<b>Executive Director Overview</b>	<p>Safer Staffing exception reporting directly to the Senior Management Committee prior to Trust Board is occurring in order to provide opportunity for fuller internal discussion and subsequent shorter exception based reporting to Trust Board.</p> <p>NHSI requirement is that Safer Staffing data must be reviewed by Committees which include both the Director of Nursing and Medical Director. There must also be clarity of reporting process and where responsibility for action resides.</p> <p>February 2019 data shows 6 hospital sites reporting as red in the national publication data:</p> <ul style="list-style-type: none"> <li>• Moorgreen Hospital</li> <li>• Elmleigh Hospital</li> <li>• Bluebird House</li> <li>• Petersfield Hospital</li> <li>• Fordingbridge Hospital</li> <li>• Western Community Hospital</li> </ul>

	18 inpatient red flag incidents together with resulting themes have been identified for February 2019.
<b>Previously considered by:</b>	N/A

<b>Strategic Priorities this paper supports:</b>		
<b>Quality</b>	<input checked="" type="checkbox"/>	Provide good quality care People are able to access the care they need, when they need it
<b>People</b>	<input checked="" type="checkbox"/>	Increased recruitment and retention of staff, leading to a more stable workforce Staff feel involved, motivated and proud to work at Southern Health The size, shape and skills of our workforce can meet current and future care needs of the people we serve
<b>Transformation</b>	<input checked="" type="checkbox"/>	Patients have better access, experience, and outcomes as a result of transformed, joined up services Expansion and improvement of specialised mental health services for adults and young people are well underway
<b>Money</b>	<input checked="" type="checkbox"/>	Make every penny count towards patient care and service improvement
<b>Does this impact any Board Assurance Framework / Corporate Risks</b>		<p>SR1: There is a risk that we provide poor quality or ineffective care resulting in serious harm.</p> <p>SR2: There is a risk that we fail to continually improve the services provided by the Trust to deliver better outcomes.</p> <p>SR4: There is a risk that we fail to maintain and develop confidence in SHFT as a care provider.</p> <p>SR5: There is a risk that we do not maintain &amp; develop specialised services in a way that benefits patients.</p> <p>SR6: There is a risk that we cannot retain and attract sufficient and skilled staff.</p> <p>SR8: There is a risk that we fail to deliver medium &amp; long-term financial sustainability.</p>

## Safer Staffing Monthly Exception Report – March 2019

### Purpose

The purpose of this report is to provide the Senior Management Committee (SMC) with the exception report for March 2019 (February 2019 data) presented within the overall data submissions for safer staffing in line with national reporting requirements.

### Background

Reporting to NHS England and NHS Choices commenced in June 2014.

Narrative has been provided to inform the SMC where professional judgement decisions have been applied to improve staffing levels in inpatient units as required for this period where staffing levels have fallen below 80% establishment fill for shifts.

### 1. Inpatient exception report (for the period 1st February to 28<sup>th</sup> February 2019)

1.1 - Off framework agency use is included within data unless specified otherwise.

13 wards, 6 sites, were reported in the national publication data set as red in February. Fill rates for inpatient wards are detailed below;-

Hospital Site name	Ward Name	Data by Ward				Data by Hospital Site (Nationally reported)			
		DAY	DAY	NIGHT	NIGHT	DAY	DAY	NIGHT	NIGHT
		Average fill rate RN Staff (%)	Average fill rate CSW staff (%)	Average fill rate RN staff (%)	Average fill rate CSW staff (%)	Average RN fill rate (%) as a site	Average CSW fill rate (%) as a site	Average RN fill rate (%) as a site	Average CSW fill rate (%) as a site
MOORGREEN HOSPITAL	Willow Ward	85.5%	135.5%	75.6%	148.4%	85.5%	135.5%	75.6%	148.4%
RAVENSWOOD HOUSE	Ashford Unit	98.8%	63.3%	107.4%	94.0%	89.4%	90.0%	99.4%	101.7%
ANTELOPE HOUSE	Saxon Ward	91.3%	122.9%	177.6%	129.2%	81.0%	130.3%	172.3%	142.1%
	Trinity Ward	76.0%	143.0%	203.4%	143.0%				
	Hamtun Ward PICU	78.2%	125.5%	135.2%	154.3%				
ELMLEIGH	Elmleigh Inpatient	79.9%	104.3%	64.7%	154.8%	79.9%	104.3%	64.7%	154.8%
FOREST LODGE	Forest Lodge	102.7%	95.3%	100.0%	101.9%	102.7%	95.3%	100.0%	101.9%
HOLLYBANK	Hollybank	95.0%	99.8%	101.0%	100.9%	95.0%	99.8%	101.0%	100.9%
MELBURY LODGE	Kingsley Ward	127.5%	96.4%	66.8%	162.2%	100.9%	98.6%	82.4%	150.2%
	Mother & Baby Unit	83.4%	95.4%	92.9%	113.0%				
PARKLANDS HOSPITAL	Hawthorns 1	67.7%	135.5%	69.9%	141.8%	81.5%	117.0%	91.8%	149.8%
	Hawthorns 2	77.7%	115.5%	103.7%	100.1%				

RAVENSWOOD HOUSE	Lyndhurst Ward	81.8%	113.5%	96.4%	122.1%	89.4%	90.0%	99.4%	101.7%
RAVENSWOOD HOUSE	Malcolm Faulk Ward	76.8%	91.2%	100.3%	98.0%	89.4%	90.0%	99.4%	101.7%
	Mary Graham Ward	105.0%	92.8%	101.6%	103.9%				
	Meon Valley Ward	90.8%	109.4%	89.5%	100.2%				
SOUTHFIELDS	Beech Ward	91.3%	127.4%	102.2%	100.9%	95.3%	102.5%	97.3%	103.9%
	Cedar Ward (Southfield)	104.2%	90.5%	98.4%	103.7%				
	Oak Ward	90.4%	95.3%	91.2%	107.3%				
BLUEBIRD HOUSE	Moss Ward								
	Stewart Ward	53.2%	57.9%	79.7%	85.9%	70.4%	90.6%	85.9%	132.6%
	Hill Ward	130.9%	194.5%	98.2%	296.1%				
LEIGH HOUSE	Leigh House	92.9%	158.7%	87.8%	203.0%	92.9%	158.7%	87.8%	203.0%
GOSPORT WAR MEMORIAL HOSPITAL	Ark Royal Ward	90.2%	105.2%	99.8%	191.1%	98.8%	99.9%	97.0%	146.8%
	Sultan Ward	132.8%	101.4%	100.0%	179.3%				
PETERSFIELD HOSPITAL	Cedar Ward (Petersfield)	75.4%	102.7%	89.4%	105.6%	78.6%	103.4%	92.0%	103.7%
	Rowan Ward	82.6%	104.3%	94.7%	100.0%				
FORDINGBRIDGE	Ford Ward	93.6%	84.9%	101.4%	78.6%	93.6%	84.9%	101.4%	78.6%
LYMINGTON NEW FOREST HOSPITAL	Deerleap Ward	103.1%	112.0%	132.2%	98.2%	91.1%	125.3%	106.0%	110.7%
	Longbeech Ward	89.5%	162.9%	107.1%	105.4%				
	Medical Admissions Unit	84.4%	83.0%	96.4%	91.1%				
	Wilverley Ward	92.5%	186.1%	96.5%	185.4%				
ROMSEY HOSPITAL	Chichester/ Nightingale Ward	102.5%	95.7%	100.9%	197.8%	102.5%	95.7%	100.9%	197.8%
ALTON COMMUNITY HOSPITAL	Anstey Ward	96.5%	88.3%	98.4%	96.4%	96.5%	88.3%	98.4%	96.4%
GOSPORT WAR MEMORIAL HOSPITAL	Poppy Ward	96.3%	94.7%	91.1%	122.9%	98.8%	99.9%	97.0%	146.8%
GOSPORT WAR MEMORIAL HOSPITAL	Rose Ward	82.8%	103.9%	96.6%	156.8%				
MELBURY LODGE	Stefano Olivieri Unit	82.8%	104.0%	99.6%	198.0%	100.9%	98.6%	82.4%	150.2%
PARKLANDS HOSPITAL	Beechwood Ward	96.3%	112.2%	96.6%	248.7%	81.5%	117.0%	91.8%	149.8%

	Elmwood Ward	93.9%	110.9%	96.5%	165.6%				
WESTERN COMMUNITY HOSPITAL	Berrywood Ward	69.1%	96.3%	102.0%	98.2%	69.1%	96.3%	102.0%	98.2%
	Beaulieu Ward								

### **Moorgreen Hospital, Willow Ward - Registered Nurse night shifts**

During the month of February, the ward team ensured staffing levels were maintained using overfill of unregistered staff. This skill mix change provided the correct number of staff on duty, but a diluted skill mix – however this did not affect the team’s ability to deliver safe care during February. The ward are providing to care to one particularly complex individual who is awaiting specialist placement and this is requiring additional agency cover to support staff rotations during every shift. Bank and Agency is being used to cover 9wte vacancies, however the team are also managing an additional 7wte employed but unavailable to work (sickness).

### **Elmleigh Hospital - Registered Nurse day and night shifts**

During the month of February, Elmleigh’s Registered Nurse fill rates fell below planned levels during the day and night shifts. Night shift cover was mitigated with additional unregistered workers covering gaps in Registrant shifts and this skill mix change did not affect patient care. Day shift gaps required senior staff and non-ward based staff to work clinically to cover Registrant duties. Bank and Agency is being used to cover 9wte vacancies, however this is still leaving some shifts short due to 6wte being unavailable to work (sickness and maternity leave).

### **Bluebird House, Stewart Ward – Registered Nurse day shifts**

Moss and Stewart wards are currently combined to one ward. There remains an additional increased provision for specialising which is over and above their funded establishment baseline numbers. This is due to one particularly complex individual requiring additional staff to support and ensure rotation of staff through the shifts. Long lines of Bank and Agency workers are being used to enhance the substantive team numbers.

Daily staffing reviews continue in Bluebird House together with the utilisation of temporary staff on long lines of work to offset vacancy levels, together with senior level support as required. Due to successful recruitment to vacancies recently, the substantive staffing position on the unit has improved.

### **Petersfield Hospital, Cedar Ward – Registered Nurse day shifts**

Cedar ward continue to pro-actively recruit to vacancies and utilise a number of strategies including recruitment open days and social media campaigns – but this has not yielded significant results. Bank and Agency workers are covering 5wte vacancies, however the ward team have an additional 4wte staff who are unavailable to work (sickness).

### **Fordingbridge Hospital – CSW night shifts**

Bank and Agency are being used to cover 5wte vacancies on the ward, however they have an additional 3wte staff who are unavailable to work (sickness). This is a small team of 27.8wte funded posts and a 29% unavailability gap has not been possible to cover for every shift.

### **Western Community Hospital, Berrywood Ward – Registered Nurse day shifts**

Berrywood ward continue to have a higher than funded complexity of caseload and in addition to this, the team are trying to mitigate 6wte unavailable workers (sickness). This has resulted in gaps of Registered staff availability during the day shifts throughout February. To mitigate this, senior clinical staff have been covering Registrant duties.

## 1.2 Inpatient wards temporary staffing fill rates

Wards using over 50% temporary staff trigger as Safer Staffing concerns and this is followed up with senior clinical leaders for the service to ensure no additional recruitment support is required, whether long lines of work can be employed to ensure consistency of care is delivered and to monitor the impact of this mix. The following wards triggered in the month of February:-

Site	Unit	Staff Group	Shift	Substantive	Bank (Multi Post Holder)	Bank (Bank Only contract)	Agency	Total Temp Fill Rate	
ANTELOPE HOUSE	Hamtun Ward PICU	Registered	Night	2.9%	0.0%	21.0%	76.1%	97%	Bank and Agency covered 10 wte vacancies and 3.3wte unavailable workers. Net resource was an additional 3.6% due to acuity
	Hamtun Ward PICU	Unregistered	Night	25.8%	5.3%	68.9%	0.0%	74%	
	Saxon Ward	Registered	Night	26.9%	2.0%	21.8%	49.4%	73%	
	Trinity Ward	Registered	Night	43.4%	19.2%	1.7%	35.7%	57%	
	Trinity Ward	Unregistered	Night	42.0%	7.3%	50.7%	0.0%	58%	
ELMLEIGH	Elmleigh Inpatient	Registered	Night	30.1%	2.9%	35.0%	32.0%	70%	
MELBURY LODGE	Mother & Baby Unit	Registered	Night	38.5%	0.0%	7.7%	53.8%	62%	Bank and Agency covered 3wte Vacancies and 4wte unavailable workers. Net resourcing -2.6%
PARKLANDS HOSPITAL	Hawthorns 2	Unregistered	Day	49.3%	15.3%	24.6%	10.8%	51%	
FORDINGBRI DGE	Ford Ward	Registered	Night	46.5%	21.3%	25.1%	7.1%	54%	
LYMINGTON NEW FOREST HOSPITAL	Deerleap Ward	Registered	Night	32.5%	13.5%	48.6%	5.4%	68%	
	Wilverley Ward	Unregistered	Night	13.4%	23.1%	63.5%	0.0%	87%	
MOORGREEN HOSPITAL	Willow Ward	Registered	Day	46.4%	11.8%	2.1%	39.7%	54%	
	Willow Ward	Unregistered	Night	46.4%	3.2%	50.4%	0.0%	54%	
WESTERN COMMUNITY HOSPITAL	Berrywood Ward	Registered	Night	31.5%	15.8%	14.0%	38.7%	69%	
PARKLANDS HOSPITAL	Beechwood Ward	Unregistered	Night	36.1%	10.1%	53.7%	0.0%	64%	
	Elmwood Ward	Registered	Night	36.4%	28.5%	31.4%	3.8%	64%	
	Elmwood Ward	Unregistered	Night	30.8%	10.3%	57.2%	1.7%	69%	
GOSPORT WAR MEMORIAL HOSPITAL	Poppy Ward	Registered	Night	40.1%	23.3%	9.8%	26.8%	60%	
	Rose Ward	Unregistered	Night	18.2%	4.5%	77.3%	0.0%	82%	
MELBURY LODGE	Stefano Olivieri Unit	Unregistered	Night	47.4%	5.4%	39.7%	7.4%	53%	
BLUEBIRD	Hill Ward	Registered	Night	39.8%	10.9%	9.1%	40.1%	60%	

HOUSE	Stewart Ward	Registered	Night	25.0%	3.8%	5.7%	65.4%	75%	Bank and Agency was used to cover higher acuity on the ward
	Stewart Ward	Unregistered	Night	44.3%	6.5%	43.8%	5.3%	56%	
LEIGH HOUSE	Leigh House	Unregistered	Night	47.1%	3.3%	49.6%	0.0%	53%	
RAVENSWOOD HOUSE	Lyndhurst Ward	Unregistered	Night	35.5%	18.1%	46.4%	0.0%	65%	
	Malcolm Faulk Ward	Registered	Night	41.8%	15.4%	14.4%	28.4%	58%	
	Mary Graham Ward	Registered	Night	46.0%	7.0%	33.0%	14.1%	54%	

Three wards had the highest level of Agency fill during the month of February:-

- Hamptun Ward PICU, Mother and Baby Unit and Stewart Ward

### 1.3 Inpatient staffing red flag incidents

The below table provides additional information regarding red flag incidents for February 2019 for all inpatient areas. Within this report, red flag information is detailed at a level that provides an overview. Additional information relating to any impact to patients will be detailed within Quarterly Divisional Quality and Governance reports. Actions identified will be monitored within Divisions to ensure themes reported within red flag incidents are addressed.

Ward/Team	Number of Incidents	Detail
Antelope House - Saxon	1	Staffing levels not matched to patient need.
Antelope House - Hamtun	2	Staffing levels not matched to patient need.
Elmleigh Inpatients	1	Wrong medication given due to short staffing levels.
Antelope House - Trinity	1	Staffing levels not matched to patient need.
Ravenswood - Mary Graham Ward	1	Agency worker had not received proper introduction.
Parklands - Hawthorns 2	1	Staffing levels not marched to patient need.
Melbury Lodge - Mother and Baby unit	1	Staffing levels low due to sickness.
Parklands Site Management	1	No catering staff available to serve hot meals.
Melbury Lodge - Kingsley	1	Admissions paperwork not processed in timely manner for multiple patients due to short staff/workload.
Leigh House inpatients	1	Patient discharged before MHA administration process could be completed.
Anstey Ward	1	Staffing levels not matched to patient need.
Lymington Hospital - Wilverley 2	2	Staffing levels not matched to patient need resulting in patient falls.
Alton Community Hospital Clinics	1	Staffing levels not matched to patient need.
Lymington Hospital - MIU	2	Staffing levels low.
Fordingbridge Hospital - Ford Ward	1	Staffing levels low due to sickness.

## 2. Integrated Services Division – Community Teams Exception Report

2.1 - For community teams, fill rates are determined by comparing the planned roster numbers with the 'actual' worked numbers of staff on duty.

	Registered Nurse Fill Rate	Unregistered Nurse Fill Rate	Combined Fill Rate	Net resourcing impact	Red Flag Incidents
Andover 1 ICT	159.09%	58.02%	108.55%		
Avon Valley ICT	101.52%	69.53%	85.53%		
Basingstoke Town East ICT	42.02%	143.75%	92.89%		
Basingstoke Town West ICT	74.74%	126.59%	100.66%		
Chandlers Ford ICT	139.41%	121.99%	130.70%		
Eastleigh Town ICT	57.71%	92.65%	75.18%	5wte vacancies with no temporary staff availability	
Fareham 1 ICT	94.83%	101.75%	98.29%		
Fareham 2 ICT	106.09%	56.86%	81.47%		
Gosport 1 ICT	109.03%	88.01%	98.52%		
Gosport 2 ICT	115.78%	64.22%	90.00%		
Havant ICT	78.37%	154.66%	116.51%		
Hayling ICT	84.01%	61.85%	72.93%	2wte staff unavailable for work	
Hythe & Waterside ICT	109.32%	117.12%	113.22%		
Lymington ICT	165.70%	94.82%	130.26%		
New Milton ICT	124.29%	116.91%	120.60%		
Petersfield ICT	91.63%	76.58%	84.11%		
Romsey ICT	86.32%	81.48%	83.90%		
Rural East ICT	136.87%	89.02%	112.95%		
Rural West ICT	51.55%	129.17%	90.36%		
Southern Parishes ICT	107.07%	58.21%	82.64%		
Totton ICT	58.02%	47.26%	52.64%	0.3wte unavailability	1
Waterlooville ICT	85.15%	86.15%	85.65%		
Winchester City ICT	125.99%	56.21%	91.10%		1
Winchester Rural East ICT	86.30%	62.16%	74.23%	0.8wte unavailability	
Winchester Rural North ICT	100.79%	42.81%	71.80%	0.5wte sickness	
Winchester Rural South ICT	132.05%	71.44%	101.75%		

5 Community teams show as below planned hours for the month of February. For 3 of these teams – Eastleigh and Hayling ICTs, this directly impacted on planned work and patients experienced a higher level of cancelled and rebook appointments.

For Totton and Winchester teams, roster reviews are underway to ensure roster templates reflect planned capacity requirements.

Eastleigh, Totton and Winchester ICTs have flagged for the previous three months with understaffing issues. Bank and Agency fill for community posts has not been possible and recruitment in some geographies has been challenging.



## 2.2 - Community Team Red Flags

Six red flag staffing incidents were logged during February.

Winchester City ICT	1	Wrong letter uploaded due to short staffed.
Totton/Lyndhurst ICT	1	Wrong information uploaded to RiO due to short staffing levels.
Specialist Palliative Care Team	2	Patients have breached agreed target time for OT specialist palliative care team assessment.
Andover - Health Visiting Team	2	Birth visit completed out of compliance due to shortage of staff.

## 2.3 - Community Mental Health Teams Exception Report

	Registered Nurse Fill Rate	Unregistered Nurse Fill Rate	Combined Fill Rate		Red Flag Incidents
CMHT Andover and Winchester	101.63%	94.22%	97.93%		
CMHT Bordon and Petersfield	72.27%	79.00%	75.63%	2.7wte unavailability due to sickness. No Bank and Agency availability to cover	
CMHT Central Southampton	152.99%	111.05%	132.02%		1
CMHT East Southampton	121.96%	88.31%	105.13%		
CMHT Eastleigh & Romsey	56.95%	30.40%	43.68%	2wte vacancies unable to be covered with Bank and Agency workers	
CMHT Fareham and Gosport	122.83%	75.46%	99.15%		
CMHT Havant and Waterlooville	114.39%	69.29%	91.84%		
CMHT New Forest	96.16%	134.72%	115.44%		1
CMHT North Area	91.47%	127.73%	109.60%		1
CMHT West Southampton	114.66%	137.32%	125.99%		

Two CMHTs were below planned hours for the month of February, however Eastleigh have now flagged for 3 consecutive months with Registered Nurse gaps.

## 2.4 - Community Mental Health Teams - Red Flags

Six red flag staffing incidents was logged during February which are detailed below. Red flag incidents occur when staffing levels or skill mix impacts service delivery:-

College Keep Wellbeing Centre	2	Lack of consultant psychiatrist availability.
South Area - AMHT	1	Staffing levels not matched to patient need as care coordinator off sick.
North Area - AMHT	1	Staffing levels not matched to patient need.
New Forest CMHT	1	Managers hearing not arranged in time due to short staff/workload.
West Area - AMHT	1	Patient not referred for tribunal due to workload/short staff.

## 3 Risks and issues

Continuing to source appropriate staffing to meet the requirements of SHFT inpatient units and community teams in line with workforce plans, and the national climate of reduced Registered Nurse availability.

Under the leadership of the Director and Deputy Director of Nursing to reduce temporary staffing and eliminate non-framework agency use whilst maintaining safer staffing levels and complying with NHS Improvement (NHSI) agency rules.

Rostering review was launched in January 2019 and an efficiency programme has been developed following this diagnostic review. The focus in January was run rate variation on last years spend. The deep dive focus for February and March is AL planning.

Successful recruitment into the Safer Staffing Lead post, which is now vacant. Second interviews took place on 24<sup>th</sup> January 2019 and a successful appointment has been made. The candidate will commence in post in May 2019.

#### **4 Next Steps and Priorities for 2019**

Continued focus on effective rostering to improve staffing utilisation and productivity in line with Lord Carter's recommendations has now commenced. It is anticipated that this project will run until March 2019.

Further refine the acuity and dependency measurement process within community settings.

Reduction of non-framework agency spend, reduce reliance on bank and agency staff and reduce agency expenditure in line with NHSI target.

Continue to embed Safer Staffing within SHFT and ensure continued alignment to the latest National Quality Board guidance.

Continuations of work to develop new roles linked to new models of care to ensure a pipeline of appropriately trained staff are available.

Exploration of the Aneurin Bevan Caseload Management Tool within AMH, LD and OPMH in support of safe caseloads.

Further triangulation of teams in intensive support, workforce issues and quality metrics.

#### **5 Recommendation**

5.2 The Senior Management Committee is requested to receive the exception report Safer Staffing for March 2019 (February 2019 data), and to recommend any escalations for inclusion in Trust Board exception report.