

REPORT TO THE SENIOR MANAGEMENT COMMITTEE	
Date	
Agenda Item	
Title	Safer Staffing Monthly Exception Report April 2019 (March 2019 data)
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Sponsoring Director	Paula Hull – Director of Nursing and Allied Health Professionals

Purpose & Action Required	<p>The purpose of this report is to provide the monthly exception report for April 2019 (March 2019 data) in relation to data submissions for Safer Staffing.</p> <p>The Senior Management Committee is requested to receive the exception report Safer Staffing for April 2019 and to recommend any escalations for inclusion in Trust Board report.</p>
Executive Director Overview	<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>March 2019 data shows 5 hospital sites reporting as red in the national publication data:</p> <ul style="list-style-type: none"> • Elmleigh Hospital • Bluebird House • Petersfield Hospital • Alton Community Hospital • Western Community Hospital <p>20 inpatient red flag incidents together with resulting themes have been identified for March 2019.</p>

Previously considered by:	N/A
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Strategic Priorities this paper supports:		
Quality	<input checked="" type="checkbox"/>	Provide good quality care People are able to access the care they need, when they need it
People	<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
Transformation	<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
Money	<input checked="" type="checkbox"/>	Make every penny count towards patient care and service improvement
Does this impact any Board Assurance Framework / Corporate Risks		<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 & 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 & long-term financial sustainability.</p>

Safer Staffing Monthly Exception Report – April 2019

Purpose

The purpose of this report is to provide the Senior Management Committee (SMC) with the exception report for April 2019 (March 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 March to 31st March 2019)

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

13 wards, 5 sites, were reported in the national publication data set as red in March. 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	91.7%	167.7%	95.3%	167.7%	91.7%	167.7%	95.3%	167.7%
RAVENSWOOD HOUSE	Ashford Unit	92.6%	64.2%	101.0%	95.8%	84.7%	91.0%	101.2%	98.5%
ANTELOPE HOUSE	Saxon Ward	99.7%	121.7%	162.9%	131.6%	88.4%	128.4%	197.3%	132.8%
	Trinity Ward	77.0%	141.7%	227.0%	135.0%				
	Hamtun Ward PICU	91.5%	122.2%	201.0%	131.8%				
ELMLEIGH	Elmleigh Inpatient	76.9%	108.1%	69.4%	155.7%	76.9%	108.1%	69.4%	155.7%
FOREST LODGE	Forest Lodge	97.8%	95.5%	100.7%	98.6%	97.8%	95.5%	100.7%	98.6%
HOLLYBANK	Hollybank	86.0%	93.9%	100.2%	100.5%	86.0%	93.9%	100.2%	100.5%
MELBURY LODGE	Kingsley Ward	144.9%	92.2%	67.2%	178.3%	106.2%	95.8%	83.3%	138.8%
	Mother & Baby Unit	79.3%	106.1%	100.0%	96.9%				
PARKLANDS HOSPITAL	Hawthorns 1	76.5%	138.7%	52.6%	146.2%	85.0%	125.9%	89.1%	151.9%
	Hawthorns 2	74.6%	119.5%	101.9%	109.7%				
RAVENSWOOD HOUSE	Ashurst Ward	0.0%	0.0%	0.0%	0.0%	84.7%	91.0%	101.2%	98.5%
	Lyndhurst Ward	67.5%	115.0%	103.2%	96.9%				

	Malcolm Faulk Ward	80.2%	92.7%	100.2%	100.6%
	Mary Graham Ward	96.9%	96.5%	103.7%	97.3%
	Meon Valley Ward	88.0%	105.2%	100.2%	100.0%
SOUTHFIELDS	Beech Ward	112.9%	107.2%	100.4%	103.3%
	Cedar Ward (Southfield)	103.9%	96.1%	100.5%	100.0%
	Oak Ward	96.8%	109.5%	100.0%	109.6%
BLUEBIRD HOUSE	Moss Ward				
	Stewart Ward	58.6%	70.3%	77.5%	85.0%
	Hill Ward	106.3%	195.3%	86.6%	299.1%
LEIGH HOUSE	Leigh House	98.4%	158.1%	100.2%	180.1%
GOSPORT WAR MEMORIAL HOSPITAL	Ark Royal Ward	91.0%	102.6%	96.8%	151.1%
	Sultan Ward	117.5%	102.2%	95.5%	123.3%
PETERSFIELD HOSPITAL	Cedar Ward (Petersfield)	69.7%	110.7%	84.1%	116.6%
	Rowan Ward	86.2%	96.2%	90.3%	116.5%
FORDINGBRIDGE	Ford Ward	89.7%	82.3%	100.0%	100.0%
LYMINGTON NEW FOREST HOSPITAL	Deerleap Ward	111.9%	102.4%	103.4%	105.0%
	Longbeech Ward	88.9%	154.6%	100.2%	135.7%
	Medical Admissions Unit	91.4%	87.8%	98.6%	91.9%
	Wilverley Ward	93.0%	195.7%	108.2%	198.5%
ROMSEY HOSPITAL	Chichester/ Nightingale Ward	102.9%	96.7%	99.0%	202.7%
ALTON COMMUNITY HOSPITAL	Anstey Ward	105.9%	68.2%	92.4%	109.4%
GOSPORT WAR MEMORIAL HOSPITAL	Poppy Ward	100.7%	94.1%	98.4%	122.1%
	Rose Ward	94.3%	101.8%	98.4%	116.1%
MELBURY LODGE	Stefano Olivieri Unit	81.2%	91.4%	98.3%	143.1%
PARKLANDS HOSPITAL	Beechwood Ward	103.0%	114.0%	100.3%	166.7%
	Elmwood Ward	95.8%	127.7%	100.9%	182.3%
WESTERN COMMUNITY HOSPITAL	Berrywood Ward	67.4%	96.0%	98.7%	100.0%
	Beaulieu Ward				

104.3%	103.1%	100.3%	104.3%
70.2%	100.9%	80.8%	133.3%
98.4%	158.1%	100.2%	180.1%
100.2%	98.8%	97.2%	125.9%
76.9%	104.5%	87.2%	116.6%
89.7%	82.3%	100.0%	100.0%
94.6%	123.7%	101.5%	123.4%
102.9%	96.7%	99.0%	202.7%
105.9%	68.2%	92.4%	109.4%
100.2%	98.8%	97.2%	125.9%
106.2%	95.8%	83.3%	138.8%
85.0%	125.9%	89.1%	151.9%
67.4%	96.0%	98.7%	100.0%

Elmleigh Hospital - Registered Nurse day and night shifts

During the month of March, Elmleigh's Registered Nurse fill rates fell below planned levels during the night shifts. Night shift cover was mitigated with additional unregistered workers covering gaps in Registrant shifts and this skill mix change did not appear to affect patient care. Bank and Agency is being used to cover 4.3wte RN vacancies.

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. Long term placements of Bank and Agency workers are being used to enhance the substantive team numbers.

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 5.5wte vacancies, however the ward team have an additional 2.3wte staff who were unavailable to work (sickness).

Alton Community Hospital - CSW day shifts

During the month of March, Alton's CSW fill rates fell below planned levels during day shifts. This is a small team of 27.6wte funded posts with 2.3wte vacancies.

Western Community Hospital, Berrywood Ward – Registered Nurse day shifts

Berrywood ward continue to have a higher than funded complexity of caseload. This has resulted in gaps of Registered staff availability during the day shifts throughout April. 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 March:-

Site	Unit	Staff Group	Shift	Substantive	Bank (multi post holder)	Bank (Bank only contract)	Agency
ANTELOPE HOUSE	Hamton Ward PICU	Registered	Night	11.4%	11.1%	1.6%	75.9%
	Hamton Ward PICU	Unregistered	Night	26.7%	9.0%	64.2%	0.0%
	Saxon Ward	Registered	Night	20.7%	5.8%	2.0%	71.6%
	Saxon Ward	Unregistered	Night	49.3%	8.8%	41.9%	0.0%
	Trinity Ward	Registered	Night	47.7%	14.1%	13.7%	24.5%
MELBURY LODGE	Mother & Baby Unit	Registered	Night	22.6%	6.5%	3.2%	67.7%
	Hawthorns 2	Unregistered	Night	40.2%	9.8%	48.0%	2.0%

FORDINGBRIDGE	Ford Ward	Registered	Night	42.1%	9.7%	33.7%	14.5%
MOORGREEN HOSPITAL	Willow Ward	Registered	Day	35.8%	8.7%	0.8%	54.7%
	Willow Ward	Unregistered	Day	46.0%	5.9%	22.8%	25.3%
	Willow Ward	Registered	Night	31.8%	33.7%	6.9%	27.6%
	Willow Ward	Unregistered	Night	31.0%	6.7%	61.6%	0.7%
RAVENSWOOD HOUSE	Ashford Unit	Unregistered	Night	48.2%	24.7%	27.1%	0.0%
BLUEBIRD HOUSE	Hill Ward	Registered	Night	24.4%	9.4%	14.8%	51.3%
	Moss Ward	Registered	Day	0.0%	100.0%	0.0%	0.0%
	Moss Ward	Unregistered	Day	0.0%	0.0%	100.0%	0.0%
	Stewart Ward	Registered	Night	43.6%	6.4%	22.7%	27.3%
	Stewart Ward	Unregistered	Night	42.5%	5.6%	48.1%	3.9%

Five wards had the highest level of Agency fill during the month of March:-

- Hamptun Ward PICU, Saxon Ward, Mother & Baby Unit, Willow Ward and Hill Ward.

1.3 Inpatient staffing red flag incidents

The below table provides additional information regarding red flag incidents for March 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
Leigh House	1	Staffing levels not matched to patient need.
Lymington - Wilverley 2	1	Staffing levels not matched to patient need.
Antelope House - Trinity	4	Staffing levels not matched to patient need.
Antelope House - Saxon	2	Staffing levels not matched to patient need.
Antelope House - 136 Suite	1	Staffing levels not matched to patient need.
Southfield - Oak Ward	1	Section 17 leave not facilitated due to staffing levels.
Alton - Anstey Ward	1	Staffing pressures.
Melbury Lodge - Mother and Baby	1	Staffing levels not matched to patient need.
Lymington MIU	1	Staffing levels not matched to patient need.
Petersfield - Cedar Ward	1	Staffing levels not matched to patient need.
Petersfield - Rowan	3	Staffing levels not matched to patient need. Needle stick injury due to staff shortage.
Ravenswood - Malcolm Faulk Ward	1	Short staffed due to band general nurse taking mental health shift.
Lymington MAU	1	Insufficient staffing levels.
Beechwood Ward	1	Staffing levels not matched to patient need.

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.

Team	Registered Nurse Fill Rate	Unregistered Nurse Fill Rate	Combined Fill Rate	Red Flag Incidents
Andover 1 ICT S00486	149.62%	65.36%	107.49%	
Avon Valley ICT S00468	94.27%	72.78%	83.53%	
Basingstoke Town East ICT S00439	40.10%	106.23%	73.16%	
Basingstoke Town West ICT S00438	71.97%	109.90%	90.93%	
Chandlers Ford ICT S00466	132.87%	123.53%	128.20%	
Eastleigh Town ICT S00495	53.19%	69.86%	61.53%	
Fareham 1 ICT S00521	98.70%	105.23%	101.96%	
Fareham 2 ICT S00522	103.37%	66.94%	85.16%	
Gosport 1 ICT S00523	101.76%	100.91%	101.34%	
Gosport 2 ICT S00524	115.62%	50.14%	82.88%	
Havant ICT S00542	81.72%	120.85%	101.28%	
Hayling ICT S00544	79.59%	100.41%	90.00%	
Hythe & Waterside ICT S00470	117.41%	132.76%	125.09%	
Lymington ICT S00472	175.62%	64.40%	120.01%	
New Milton ICT S00473	108.62%	108.99%	108.81%	
Petersfield ICT S00541	113.15%	81.20%	97.18%	
Romsey ICT S00487	89.38%	73.88%	81.63%	
Rural East ICT S00440	83.48%	42.10%	62.79%	
Rural West ICT S00437	51.52%	146.79%	99.15%	
Southern Parishes ICT S00467	116.42%	55.60%	86.01%	
Totton ICT S00469	52.03%	41.92%	46.98%	
Waterlooville ICT S00543	86.42%	82.29%	84.36%	
Winchester City ICT S00483	121.54%	56.07%	88.80%	1
Winchester Rural East ICT S00498	76.10%	56.20%	66.15%	
Winchester Rural North ICT S00497	108.38%	44.06%	76.22%	
Winchester Rural South ICT S00484	124.39%	70.89%	97.64%	

6 community teams show as below planned hours for the month of March.

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

Four red flag staffing incidents were logged during March.

Ward/Team	Number of Incidents	Detail
HV - Basingstoke South & Rural	1	Staffing levels not matched to patient need. Sickness.

HV - Basingstoke North & Rural	1	Staffing levels not matched to patient need. Sickness.
Winchester City ICT	1	Insufficient staffing levels.
Specialist Palliative Care	1	Shortage of admin staff.

2.3 - Community Mental Health Teams Exception Report

Team	Registered Nurse Fill Rate	Unregistered Nurse Fill Rate	Combined Fill Rate	Net Resourcing Impact	Red Flag Incidents
CMHT Andover and Winchester	107.77%	107.83%	107.80%		1
CMHT Bordon and Petersfield	76.98%	105.04%	91.01%		
CMHT Central Southampton	138.37%	98.60%	118.49%		1
CMHT East Southampton	117.10%	77.49%	97.29%		1
CMHT Eastleigh & Romsey	86.03%	43.52%	64.78%		1
CMHT Fareham and Gosport	108.55%	67.18%	87.86%		
CMHT Havant and Waterlooville	100.08%	71.27%	85.68%		
CMHT New Forest	97.78%	119.75%	108.76%		2
CMHT North Area	88.28%	91.09%	89.68%		1
CMHT West Southampton	125.88%	142.68%	134.28%		

One CMHT was below planned hours for the month of March, however Eastleigh have now flagged for 4 consecutive months with Registered Nurse gaps.

2.4 - Community Mental Health Teams - Red Flags

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

Ward/Team	Number of Incidents	Detail
Andover and Winchester CMHT	1	Insufficient staffing levels due to staff not checking roster.
South Central - CMHT AMH	1	Insufficient staffing levels - no 1.0 WTE consultant.
New Forest CMHT	2	Managers hearing not arranged in time due to short staff/workload.
Eastleigh & Romsey CMHT	1	Referral to tribunal not arranged in time due to short staff/workload.
East Area - AMHT	1	Staffing levels not matched to patient need.
North Area - AMHT	1	Insufficient staffing levels.

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.

4 Next Steps and Priorities for 2019

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 focus for February and March was AL planning. The focus in Q1 will be a deep dive into overtime.

Continued focus on effective rostering to improve staffing utilisation and productivity in line with Lord Carter's recommendations has now commenced.

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, accompanied by an audit of compliance against the Safer Staffing Policy which is due for renewal by September 2019.

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

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