

HEALTH OVERVIEW AND SCRUTINY COMMITTEE: 10 JUNE 2015

REPORT OF LEICESTERSHIRE PARTNERSHIP NHS TRUST

SAFER STAFFING UPDATE - INPATIENT WARDS

Purpose of report

1. The purpose of this report is to
 - (a) Provide the current position with regards to the National Quality Board (NQB) Safer Staffing requirements across the three operational divisions in LPT.
 - (b) Provide assurance that all efforts are being made to ensure detailed internal oversight and scrutiny in place to ensure safer staffing levels are maintained.
 - (c) Highlight the ongoing work that is being undertaken to support recruitment and retention of qualified staff.

National Quality Board Guidance

2. In November 2013, the NQB issued guidance to optimise nursing, midwifery and care staffing capability and capacity. The guidance specified a requirement for the Trust Board to receive and publish reports describing the staffing capacity and capability on both a shift-by-shift basis.

Responding to the NQB Guidance

3. In response to the NQB guidance, the Trust implemented a 'Safer Staffing' portal across all inpatient areas which provides a real time, co-ordinated approach for wards to record staffing levels, capability and ward acuity** information for each shift from 1st April 2014. Each month, the Chief Nurse presents to the Trust Board an analysis of the following Safer Staffing indicators:
 - (a) Use of Temporary Staff vs Substantive Staff
 - (b) Planned vs actual number of staff
 - (c) Skill mix of nursing staff
4. Every 6 months, the Board receives an 'Inpatient staffing establishment review' report which provides an overview of the work being undertaken to ensure safer staffing standards are met across all our inpatient wards. These reports are made publically available via the NHS Choices website and our Trust internet page.

*** The term acuity refers to the level of severity of an illness. This is one of the parameters considered in when allocating nursing staff, or making staffing decisions and deciding on long term care planning.*

5. The Chief Nurse has given responsibility to lead nurses for ensuring the accurate collection of staffing and acuity information into the Trust's bespoke Safer Staffing portal. This enables the Trust to produce a Safer Staffing dashboard each month to provide an overview of staffing during the period in review. Lead nurses also provide further qualitative narrative to identify any particular 'hot spots' and actions being taken to ensure our wards remain safe.

OVERVIEW ACROSS DIVISIONS

COMMUNITY HEALTH SERVICES DIVISION (CHS)

6. The Community Health Services division inpatient service consists of Mental Health Services for Older People (MHSOP) and Community General Hospitals. There are variations in staffing numbers and ratios due to the range of different services provided by each area. The ward bed capacity is different in all areas, as are planned staffing levels.
7. Within Community Hospitals, the wards utilising more than 20% temporary workers correlates with the higher number of vacancies within these areas. The exception is Hinckley and Bosworth Hospital - East Ward, where the increase in usage of temporary workers is associated with the number of additional beds that have opened.
8. During April 2015, City Inpatient Units - Clarendon Ward and Coalville Hospital - Ward 2 experienced an increase in short-term staff sickness absence; as well as increase patient acuity requiring additional staff to provide increased levels of care 'specialling'* to patients.

Inpatient Areas for Mental Health Service for Older People (MHSOP)

9. Evington Centre - Coleman Ward used the highest number of temporary workers across MHSOP during April 2015, with the greatest use being health care support workers (HCSW) on day shifts.
10. For a significant period of the month, there have been higher needs for one to one patient observations on the ward and high levels of activity as most male admissions for a significant period were re-directed to Evington Centre - Coleman Ward as a result of the re-distribution of beds from Evington Centre - Wakerley Ward. This has supported improvement in other areas as staff have been re-allocated across the remaining 4 MHSOP wards.
11. There is currently a reliance on temporary workers to cover vacancies, sickness and observations and mitigating actions are in place.
12. The actions detailed below are aimed at ensuring that any associated potential risks to the provision of safer nursing, patient safety outcome measures and staff reported measures are prevented.

**Specialling refers to constant 1 to 1 observation of a patient.*

- (a) Sickness management policy is implemented and reviews are in place.
- (b) Staff from neighbouring wards provide support at times of high activity.
- (c) Staff overtime is offered to cover staffing shortfalls and supernumerary Ward Sisters cover staffing shortfalls.
- (d) Movement of staff from better established areas to City In-patient Units – Clarendon and St Luke's – Ward 1.
- (e) Staff from Evington Centre - Wakerley Ward staff have been re-distributed across the other MHSOP wards which is supporting the reduction in usage of temporary workers across MHSOP.
- (f) Staffing establishments are currently under review within MHSOP.
- (g) A robust system has been set up for the review of 1 to 1 patient observations to ensure patients are appropriately managed and their needs re-assessed as appropriate.
- (h) St Luke's - Ward 3 at Market Harborough re-opened on the 18th May 2015 and which lead to the reduction in extra beds being managed at Hinckley and Bosworth – East Ward. The reduction in beds reduced the requirement for additional temporary workers on Hinckley and Bosworth – East Ward.

Longer term plans underway

13. Within MHSOP, beds have been re-configured resulting in Evington Centre - Wakerley Ward currently not being in use. This has supported improvement in other areas as staff have been re- allocated across the remaining 4 MHSOP wards.
14. Within Community Hospitals, the registered nurse (RN) vacancies have significantly reduced by 67%. Ongoing recruitment actions include:
 - Over recruitment of RN nurses to provide senior clinical leadership and support to new and newly qualified staff. Further interviews planned for the 19th May 2015.
 - Rolling RN recruitment with monthly interviews.
 - 'Open Days' held at St Luke's Hospital, City In-Patient Units, and Coalville; and planned for Rutland and Melton on Saturday 16th May 2015.
 - Joint recruitment and rotational posts with University Hospitals of Leicester NHS Trust (UHL) for newly qualified nurses.
15. An options appraisal for bed reconfiguration and safer staffing within Community Hospitals is currently being developed for consultation.

16. The NHS England 'Safer Staffing: A Guide to Care Contact Time' advises that trusts complete a baseline assessment using an endorsed safer staffing toolkit by summer 2015. The inpatient areas across both Community Hospitals and MHSOP have undertaken a 20 day data collection process from Monday 12th January 2015 to Friday 6th February 2015 using the Safer Nursing Care Tool. Analysis of the acuity and dependency data has demonstrated that patient acuity has increased overall. In community hospitals there are more acutely ill patients requiring intervention with a greater potential to deteriorate. Within MHSOP, there is also an overall increase in acuity and dependency largely associated with the level of therapeutic observations; and increase in both physical health and nursing care needs.
17. The work will be triangulated with other guidance including Safer Staffing guidelines, Nurse Sensitive Indicators (NSIs) such as infection rates, complaints, pressure ulcers and falls as well as professional judgment to provide balanced assurance and proposed establishments for each ward.
18. A significant amount of recruitment support has been established to resource CHS nursing vacancies as detailed below:
 - (a) A centrally co-ordinated recruitment event has taken place weekly to interview for these roles. This has helped fill CHS inpatient vacancies.
 - (b) Recruitment profile for these roles has been elevated with articles promoting recruitment days being publicised in local press such as the Harborough Mail whilst Trust representatives have also been interviewed for Oak FM - a local radio station.
 - (c) Financial recruitment and retention incentives for East Leicestershire wards are under consideration.
 - (d) Fixed term contracts being reviewed alongside permanent contacts as a way of widening scope of attraction opportunities to potential new recruits.
 - (f) The Trust is also carrying out an in-depth staff movement review of key CHS sites to understand better why and where people are leaving these roles and where they go on to.
 - (g) LPT is attending the following recruitment events:
 - 11th May - Coventry University;
 - 8th June - De Montfort University
 - 2nd and 3rd July - Birmingham RCN recruitment fair.

FAMILIES, YOUNG PEOPLE AND CHILDREN DIVISION (FYPC)

19. There are two inpatient services within this division:

- 15 bedded Eating Disorder Service, for adults (Langley Ward- Glenfield Site);
 - 10-bedded Adolescent Unit (Oakham House which moved to Coalville Hospital (Ward 3) in March 2015).
20. The wards in FYPC are highly specialised areas and staffing requirements relating to children are underpinned by requirements covered by relevant Childrens Legislation and the Quality Network for Inpatient Child & Adolescent Health Services (CAMHS) (2009).
 21. Langley Ward is experiencing staffing challenges due to vacancies and difficulty in recruiting to the 3 RN vacancies and 2 HCSW vacancies as well as managing long term absence. Langley Ward continues to use regular temporary workers, which are funded from generated income. The closure of Evington Centre - Wakerley Ward has increased the pool of regular bank staff available to work on Langley Ward.
 22. The staffing situation will need particular attention through September 2015 and October 2015, particularly covering the RN requirements on night duty when the ward has to undertake the co-ordinators role.
 23. A recruitment plan is in place with an advert to go out to include those applicants with an RN adult qualification. Notices have been placed on the student blackboard at De Montfort University, Leicester to further publicise the employment opportunities available at Langley Ward.
 24. Oakham House has now relocated from Leicester city centre to Ward 3 at Coalville Hospital. The relocation was successful with no reportable incidents and the bed compliant is now full 10 beds, which are all currently full and staffed in line with Trust and Quality Network for Inpatient CAMHS (QNIC) guidelines.
 25. Coalville Hospital – Ward 3 (formally Oakham House) is managing staffing absence and vacancy.
 26. The increase in commute to work time for members of staff is an issue, including some experienced staff who do not drive and may request redeployment as a result. The programme to support staff experiencing issues attributed to the relocation of the ward continued through April 2015 and will remain under review.
 27. A recruitment process is in place to replace vacancies and a report is being prepared to consider the possibility of over recruiting substantive staff as opposed to the regular use of bank and agency workers.

ADULT MENTAL HEALTH AND LEARNING DISABILITIES DIVISION (AMH&LD)

28. Adult Mental Health Inpatient services consist of:

- (a) The Bradgate Unit
- (b) Learning Disabilities
- (c) Complex Care (including Low Secure Forensic Services)

29. Attracting and retaining qualified nurses remains a problem for this area. Despite ongoing recruitment, the wards have more vacancies than they did three months ago. Although a significant number of qualified nurses have been recruited recently, the overall position did not improve due to a disproportionate number of internal moves (13 staff) from staff into community based roles. However, this situation should now stabilise as these community roles are now largely filled, this means that new recruits recruited now will reduce the vacancy factor for Bradgate rather than backfilling roles that had opened up due to staff electing to move elsewhere within the Trust.

30. Short Break Homes - The Gillivers, 3 Rubicon Close and 1 The Grange

All short break homes are meeting the threshold for safer staffing based on the ratio of qualified staff to patient numbers. However, the complexity of patients and the mix of those patients has increased the need to use temporary workers to support direct patient care and maintain the standards in the short break homes.

The Short Break Homes have reviewed the Shelford Tool and Acute Hospital Tool to develop a hybrid version to support patient acuity monitoring and explore the relationship to staff duties and roles. This is expected to be completed by the end of June 2015.

Agnes Unit

31. The Agnes Unit's current staffing reflects the layout of the building and provides care in 4 pods each with 4 patients. There continues to be a high number of HCSW vacancies; and the unit continues to manage sickness absence. Temporary workers are being utilised to ensure individualised care is maintained on the Agnes Unit.

Low Secure and Rehabilitation Services

32. Herschel Prins – Phoenix Ward, Mill Lodge – Buttercup Ward and Stewart House Skye Ward have all utilised high levels of temporary workers, however they have maintained their planned number of substantive staff on duty. These wards are managing to recruit and retain staff with the exception of Mill Lodge where the number of vacancies increased by 3 during April 2015.

33. The Lead Nurse has reviewed the increase in patients with the staffing plans and the support that is required for the relocation of Mill Lodge to Stewart House is completed. A formal risk assessment has been completed.

Bradgate Unit

34. The Bradgate Unit is made up of 7 wards – Ashby, Aston, Beaumont, Bosworth, Heather, Thornton and Watermead plus Belvoir Ward – Psychiatric Intensive Care Unit (PICU).
35. All 7 Bradgate Unit Wards are utilising high numbers of temporary workers to support RN vacancies, sickness absence and maternity cover. There were 19 vacancies in April 2015, with newly recruited staff expected to be available to work on the wards in July/ August 2015.
36. The Trust is managing the impact of the skill mix of newly qualified staff employed on each ward and high usage of temporary staffing. This could lead to the inability for staff to support patients, to take leave, maintain good standards of care and documentation; and allow for staff training and supervision to take place.
37. Immediate mitigating actions commenced on 21st April 2015 and are reviewed weekly by the Divisional Senior Management Team. These actions include:
 - (a) To offer all staff in community AMH services excess/ overtime hours to support the Bradgate Wards.
 - (b) To arrange for rehabilitation inpatient areas to release experienced qualified staff on a two-weekly basis to provide experience and continuity to wards identified as high risk.
 - (c) To explore options for block booking bank/ agency workers to specific wards.
 - (d) Service Managers to map out internal vacancies and re-negotiate start dates for staff transferring to the vacancies in community/ crisis posts.
 - (e) To release occupational therapists from the METT Centre and Community teams to increase therapeutic activities/ support to wards.
 - (f) To review the process for the escalation of staffing concerns and decide the threshold for considering beds/ ward closure as a last resort.

Longer term plans underway

38. Proactive workforce planning – including staffing changes expected from Service Development Initiatives (SDIs); and workforce profiling such as retirement forecasting.
39. Reviewing the findings from discussions on recruitment and retention and identifying those appropriate for implementation in the service.

A number of staffing actions are in place:

- (a) A safe staffing workshop was undertaken by managers and staff at the end of April 2015.

- (b) A new programme of recruitment for qualified nurses is being developed, looking at encouraging experienced nurses to apply by offering skills development within first 18 months. Literature promoting this is now being attached to all relevant adverts
 - (c) Substantive and regular Bank staff are being used where possible for consistency and block booked. This action continues. The bank and agency system in the Trust is being reviewed and the Division has representatives on the groups considering the requirements of new providers.
 - (d) Managers are reviewing with Matrons the distribution of experienced staff and the 4 wards with new/newer Matrons are receiving additional support from the Senior Matrons.
 - (e) Review of recruitment options to look at attracting experienced staff and return to nursing– courses/development within 18 months.
40. Candidate resourcing strategies that are in place to support this area of the Trust include:
- (a) Rolling programme of adverts for the division / unit and there are currently adverts out for Qualified staff; these are reviewed frequently and closed periodically while vacancies exist so recruitment can commence for applicants and then adverts are reissued; this gives a short gap in adverts being available.
 - (b) Fixed term contracts being reviewed alongside permanent contracts as way of widening scope of attraction opportunities to potential new recruits.
 - (c) Attending recruitment events (11th May Coventry University RCN, 8th June De Montfort University, 2nd and 3rd July Birmingham RCN recruitment fair).

Conclusion

- 41. The Trust continues to maintain compliance with the NQB expectations and associated deadlines. The safer staffing data is being regularly monitored and scrutinised for completeness and performance by the Chief Nurse.
- 42. Where there are concerns in relation to staffing standards or variances against expected standards, the lead nurses have oversight of the plans in place to mitigate risks for each ward to ensure safe care standards are maintained. Mitigations are in place to manage the operational risks associated with the trust staffing position.
- 43. Safer staffing is maintained through the utilisation of additional staff through the LPT bank and agencies. The Trust is undertaking proactive workforce planning and workforce profiling such as retirement forecasting to support longer term plans.

44. Significant work is being undertaken in recruitment to support candidate resourcing strategies. A rolling programme of adverts for the divisions and qualified staff are currently out. Additionally a new programme of recruitment for qualified nurses is being developed, looking at encouraging experienced nurses to apply by offering skills development within first 18 months. Literature promoting this is now being attached to all relevant adverts.

Circulation under the Local Issues Alert Procedure

46. Not applicable

Relevant Impact Assessments

Equality and Human Rights Implications

47. No implications – Due regard is considered as part of equality delivery expectations in line with LPT policies.

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