UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION TRUST
BOARD OF DIRECTORS
THURSDAY 26 OCTOBER 2017

Title:	6 MONTHLY PROGRESS REPORT - NURSE STAFFING
Responsible Director:	Michele Owen, Interim Executive Chief Nurse
Contact:	Carolyn Pitt, Lead Nurse Workforce

Purpose:	To provide the Board of Directors with an update on Nursing Workforce.
Confidentiality Level & Reason:	None.
Medium Term Plan Ref:	Aim 1. Always put the needs and care of patients first.
Key Issues Summary:	This paper presents an update on the Nursing Workforce and describes the processes the Trust has adopted in reviewing the nursing staffing levels bi-annually, to support the delivery of high quality care. The report also outlines the actions underway in relation to wider aspects of the Nursing Workforce
Recommendations:	The Board of Directors is asked to receive this report on the progress ensuring compliance with the national guidance surrounding nursing staffing levels and the use of robust methodology in reviewing the current funded nursing establishments.

Approved by:	Michele Owen	**Date:**	16.10.17

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PROGRESS REPORT – NURSE STAFFING

PRESENTED BY THE EXECUTIVE CHIEF NURSE

1. **Introduction and Executive Summary**

   This paper provides an update for the Board of Directors in line with the requirements set out by the National Quality Board (NQB).

   The last report was presented in April 2017. This report has been prepared using data and information collated and collected during June 2017.

   The report provides an update on the current nursing workforce position and the plans and actions being undertaken in relation to the nursing workforce. In addition the report will reference activities undertaken, in place and planned which further support the overall nursing workforce within the Trust.

2. **Current Workforce Position**

This report focuses on the Nursing Workforce position at the end of June 2017. Throughout this paper the use of the term nursing will apply to both registered and unregistered nurses, theatre support workers and theatre practitioners.

There are three main areas of focus

- Current workforce plans
- Working as a multi-professional team
- Retention and Recruitment

2.1 **Workforce plans**

National guidance describes 3 core elements to be considered and multiple methodologies which are applied when reviewing existing and developing new Nursing Workforce plans. The elements consist of evidence based workforce planning, professional judgement and comparing staffing with peers.

The systematic formal review of nursing establishments has continued across a number of clinical areas. Agreement on investment or skill mix review has been reached with a number of areas and managers are now recruiting to their new workforce plans where these have changed.

During June 2017 the Trust undertook a 28-day period of monitoring and captured data described in the Shelford Safer Nursing Care Tool (SNCT) to relevant inpatient wards and departments. The outcomes of this review period are utilised in the systematic review of nursing establishments.

Adjustments and investment have been made to the recurrent nursing workforce plans for Ward 623 (Young Persons Unit) and Ward 625 (Haematology) during the first quarter of 2017/18. The Trust is currently reviewing the nursing workforce plans for the main Outpatients Department and for the Emergency Department. The detail of departmental workforce plans can be seen in Appendix1.

2.2 Working as a multi-professional team

The Trust continues to demonstrate commitment to investing in technology, new roles and skill mix which enables nursing staff to spend more time using their specialist training to focus on clinical duties and decisions about patient care, examples include:

- Assistant Practitioners: The introduction of Assistant Practitioner trainees into the Theatre workforce continues. There are currently 18 individuals across 3 cohorts in training. It is anticipated that four of the trainees should complete their training in March 2018 and then assume Band 4 Assistant Theatre Practitioner posts and become part of an integrated workforce plan.

- Trainee Nursing Associate role: In April 2017, ten of our nursing assistants commenced on a two year foundation degree at Birmingham City University to become "Nursing Associates". The Trust is part of the Birmingham & Solihull Partnership participating in the second wave National Pilot of the role under Health Education England. The "trainees" are all employed full time (37.5 hours per week). The individuals are undertaking a unique role and are part of a cohort of 61 trainees across the partnership. The job role whilst training is paid at agenda for change Band 3 and post holders undertake work based training with one day per week at University and one day per week on clinical placement in different practice settings. Trainees are supported by work based mentors who are experience registered nurses. The Nursing and Midwifery Council (NMC) has confirmed that is will regulate Nursing Associates and is currently working towards the necessary legislation changes required.

2.3 Retention and Recruitment

- The Lead Nurse for Workforce continues to review the Trust approach to Nurse Retention and Recruitment and ensures the strategy is dynamic and responsive.

- The Trust continues to actively recruit via a number of methods using social media and holding on site events as well as attending undergraduate careers fairs and events.

- The Lead Nurse for Workforce is a member of the NHS Improvement (NHSI) advisory group for National Nursing Retention.

- The Trust is actively involved in a National Health Education England programme of work with Birmingham City University aimed at reducing the pre-registration attrition of undergraduate nursing students and improving retention during their training. The Trust has engaged in a number of

divisionally led meetings aimed at supporting third year nursing students who are undertaking their final placement within the Trust. These have led to positive recruitment activity for newly qualified nurses.

- In July 2017 forty five, Band 7 Senior Sisters/Charge Nurses began a leadership development programme which will complete by December 2017. The programme has been designed to support their development and ensure they gain an understanding of their strengths and how this is applied to effective leadership and personal impact in the workplace. In addition candidates will learn how to identify and challenge barriers which impact on their role and safe delivery of care by acquiring strategies for developing resilience and maintaining momentum. This programme will also enable participants to approach succession planning and talent management across their teams.

The table below provides an overview of the current nursing workforce by agenda for change pay band.

Pay Band	Funded FTE June an 2017	Actual in post FTE June 2016	Actual in post FTE January 2017	Actual in post FTE June 2017	Vacancies June 2017 (over)
2	845.92	697.57	736.96	739.53	106.39
3	118.24	232.66	160.49	169.54	(51.3)
4	2.8	7.30	5.86	5.2	(2.4)
5	1519.50	1300.07	1280.22	1279.60	239.9
6	674.12	634.05	646.67	664.64	9.48
7	368.15	354.51	350.50	365.05	3.1
8a	50.76	44.23	48.23	47.17	3.59
8b	18.19	19.82	16.19	17.19	1
8c	5.0	5.0	5.0	5.0	0
8d	0	0	0	0	0
9	0	0	0	0	0
Total	3602.68	3295.21	3250.12	3292.95	309.76

Notes: FTE = Full Time Equivalent. Brackets = over against funded establishment
Band 2-4 unregistered nursing staff, Band 5-9 registered nursing staff

- The current nursing new starters list for July 2017 identifies a high number of job offers have been made to the following number of staff by band, internal refers to staff who have been internally recruited/promoted or transferred and external candidates are new to the organisation

Band	2	3	5	6	7	8a
Internal	12.28	1.0	29.64	32.81	11.32	2.0
External	35.42	0	147.0	12.0	1.0	2.0
Total	47.7	1.0	176.64	44.81	12.32	4.0

Overall total: 286.47 FTE.

3. **Right place and time: Productive working, eliminating waste, efficient deployment and minimising agency use.**

- The Trust introduced and launched the new e-rostering software, Allocate to core inpatient ward areas in June 2017. The data from this system will over time allow improved visualisation of core reports on a number of workforce metrics.

- Monthly nurse staffing calculations - The Trust submits data on a monthly basis which details by ward the planned and actual nurse staffing levels expressed as a percentage of the planned hours. In addition a 'care hours per patient per day' calculation has been calculated monthly since May 2016. The Trust data for the past 12 months (Table 3 below) demonstrates that the Trust is able to continuously provide or exceed planned staffing levels across the organisation.

Table 3: Planned versus actual nurse staffing percentage and Care hours per patient per day

Month	Day		Night			Care hours per patient per day		
	Average fill rate % Registered Nurses	Average Fill rate % Care Staff	Average fill rate % Registered Nurses	Average Fill rate % Care Staff	Total	Registered Nurse	Care Staff	Total
June 2016	102%	122%	87%	149%	**107%**	5.35	3.25	**8.60**
July 2016	100%	128%	89%	157%	**108%**	5.26	3.30	**8.56**
August-2016	94%	119%	87%	134%	**101%**	5.08	3.05	**8.13**
September 2016	96%	116%	85%	130%	**100%**	5.20	3.02	**8.22**
October 2016	96%	118%	89%	142%	**103%**	5.15	3.08	**8.23**
November 2016	103%	120%	91%	146%	**107%**	5.38	3.12	**8.51**
December 2016	94%	120%	89%	147%	**104%**	5.20	3.21	**8.41**
January 2017	96%	121%	89%	155%	**106%**	5.12	3.19	**8.31**
February 2017	98%	118%	90%	151%	**105%**	5.25	3.17	**8.42**
March 2017	99%	121%	92%	146%	**106%**	5.42	3.21	**8.63**
April 2017	96%	124%	89%	148%	**105%**	5.18	3.22	**8.40**
May 2017	100%	122%	89%	147%	**106%**	5.27	3.16	**8.43**
June 2017	95%	113%	88%	136%	**101%**	5.17	2.97	**8.14**

- The Chief Nurse has responsibility for leading the strategic staffing assessment for nursing; this includes the view of the likely temporary staffing requirements, the plans and practice changes required to ensure that the Trust is working with the "Agency Rules" document published by NHS Improvement and complies with the ceiling set for Trust agency nursing

expenditure. The Trust has clear plans in place and has successfully worked towards significantly reducing the use of agency nursing staff in line with NHS Improvements agency rules. Controls are in place and monitored and are reviewed and discussed regularly with the Associate Directors of Nursing to ensure that any changes remain dynamic and appropriate to delivery and safe and effective patient care.

- QEHB+ the Trust Staff Bank has active recruitment plans in place for registered and unregistered nursing staff and theatre practitioners. In addition the Trusts successfully piloting fast track recruitment between the Staff Bank into substantive posts.

4. **Supporting Actions**

There are ongoing work streams in place which are supporting the wider nursing workforce agenda, for example the remodelling of bed base requirements, workforce planning and nursing retention and recruitment. All elements are unpinned with links to workforce capacity and capability in conjunction with education and training.

5. **Recommendation**

The Board of Directors is asked to receive this nurse staffing update report.

Philip Norman
Executive Chief Nurse
October 2016

Division	Division / Ward	Number of funded beds/ trolleys	Registered Nurses (RN)	Unregistered Nursing Assistant	Total Establishment	Uplift %	% Skill Mix Registered Nurse	Supervisory Ward Sister / Charge Nurse	Ratio RN : Patient Early Shift (Rounded to 0.5)	Planned RN Day Late Shift	Ratio RN : Patient Night Shift	Ratio RN : Patient Early Shift	Planned RN Day Late Shift	Ratio RN : Patient Night Shift	Ratio RN : Patient Early Shift	Planned RN Day Late Shift	Ratio RN : Patient Night Shift	Comments
									Monday – Friday			**Saturday**			Sunday			
A	Critical Care A	21	120.41	11.71	132.12	24.6%	91%	100%	Critical Care Units Nurse : Patient ratio as per national levels for dependency and acuity for critical care (Level 2 / 3 / 4 patients)									
A	Critical Care B	13	74.26	6.74	81.00	24.6%	92%	100%										
A	Critical Care C	13	73.69	8.67	82.36	24.6%	89%	100%										
A	Critical Care D	20	114.52	11.71	126.23	24.6%	91%	100%										
A	Ambulatory Care	N/A	56.8	15.39	72.19	23.2%	79%	100%	Ambulatory Care Unit & East Block Day Unit - Nursing staff are deployed to work in one of 4 locations dependent upon planned activity. Core opening hours Monday – Friday with some limited planned opening at weekends :									
A	Wellcome Short Stay Unit	NA	21.43	7.74	29.17	23.2%	73%	100%										
A	Theatres	NA	343.96	108.52	452.48	24.6%			Registered Theatre Practitioners can be NMC registered Nurse or Health and Care Professions Council (HCPC) Registered Operating Department Practitioners (ODP's) Theatre Support Workers are unregistered staff									
B	Ward 620	36	40.79	17.50	58.29	23.2%	70%	100%	Combined Surgical Assessment Unit (assessment trolleys x12 & inpatient beds x24)									
B	CCU	12	39.33	6.86	46.19	23.2%	85%	100%	Staff work between Coronary Care Unit (CCU) and the Cardiac Catheter Laboratories									
B	Ward 728	36	25.48	14.89	40.37	23.2%	63%	100%	1:6	1:6	1:9	No weekend variation						
B	Ward 727	36	25.48	14.89	40.37	23.2%	63%	100%	1:6	1:6	1:9							
B	Ward 726	36	30.27	19.69	49.96	23.2%	61%	100%	1:5	1:5.	1:7							
B	Ward 306	36	27.87	14.89	42.76	23.2%	65%	100%	1:6	1:6	1:7							
B	Ward 305	36	25.48	14.89	40.37	23.2%	63%	100%	1:6	1:6	1:9							
B	Ward 304	36	25.48	14.89	40.37	23.2%	63%	100%	1:6	1:6	1:9							
B	Ward 303	36	30.27	14.89	45.16	23.2%	67%	100%	1:5	1:5	1:9							
B	Ward 302	24	18.5	11.98	30.48	23.2%	61%	100%	1:5	1:4	1:6							
B	Ward 301	NA	39.71	18.28	57.96	23.2%	69%	100%	Renal Dialysis Unit									
B	Endoscopy	NA	29.92	4.69	34.61	23.2%	86%		Endoscopy Service									

Division	Division / Ward	Number of funded beds/ trolleys	Registered Nurses	Unregistered Nursing Assistant	Total Establishment	Uplift %	% Skill Mix Registered Nurse	Supervisory Ward Sister / Charge Nurse Allowance	Ratio RN : Patient Early Shift	Planned RN Day Late Shift	Ratio RN : Patient Night Shift	Ratio RN : Patient Early Shift	Planned RN Day Late Shift	Ratio RN : Patient Night Shift	Ratio RN : Patient Early Shift	Planned RN Day Late Shift	Ratio RN : Patient Night Shift	Comments
									Monday – Friday			Saturday			Sunday			
C	ED	NA	72.14	20.66	93.43	23.2%	78%	100%	Emergency Department (ED)									Establishment under review
C	Ward 513	36	25.48	14.89	40.37	23.2%	63%	100%	1:6	1:6	1:9							
C	Ward 514	36	25.47	14.89	40.36	23.2%	63%	100%	1:6	1:6	1:9							
C	Ward 515	36	25.48	14.89	40.37	23.2%	63%	100%	1:6	1:6	1:9		No weekend variation					
C	Ward 516	36	25.48	14.89	40.37	23.2%	63%	100%	1:6	1:6	1:9							
C	Ward 518	36	25.48	14.89	40.37	23.2%	63%	100%	1:6	1:6	1:9							
C	Bournville Ward	23	12.98	18.50	31.48	23.2%	41%	100%	1:5.7	1:6	1:7.5							
C	Edgbaston Ward	17	13.50	9.58	23.08	23.2%	58%	100%	1:5.5	1:5.5	1:8.5							
C	Harborne Ward	31	15.9	20.17	36.07	23.2%	44%	100%	1:10	1:10	1:10							
C	Ward West 1	28	20.69	11.98	32.66	23.2%	63%	100%	1:55	1:5.5	1:9							
C	Ward West 2	23	18.29	9.58	27.87	23.2%	66%	100%	1:6	1:6	1:7.5							
C	CDU	68	86.49	44.17	130.66	23.2%	66%	100%	1:3.5	1:3.5	1:4	Twilight part shift on night shift Clinical Decision Unit (CDU) Combined Assessment / In-patient and Outpatient Emergency Medicine						
C	Sexual Health	NA	63.89	41	104.89				Outpatient Sexual Health Services									
C	Outpatients	NA	81.22	90.73	171.95				Outpatient Departments									
D	Ward 407	36	29.58	22.08	51.67	23.2%	57%	100%	1:54	1:5.4	1:7.	1:6	1:6	1:7	1:6	1:6	1:7	
D	Ward 408	36	29.58	14.89	44.48	23.2%	67%	100%	1:54	1:5.4	1:7	1:6	1:6	1:72	1:6	1:6	1:7	
D	Ward 409	36	29.58	22.08	51.67	23.2%	57%	100%	1:54	1:5.4	1:7.	1:6	1:6	1:7	1:6	1:6	1:7	
D	Ward 410	36	25.48	14.89	40.37	23.2%	63%	100%	1:6	1:6	1:9							
D	Ward 411	36	25.48	14.89	40.37	23.2%	63%	100%	1:6	1:6	1:9		No weekend variation					
D	Ward 412	31	20.69	11.98	32.66	23.2%	63%	100%	1:6	1:6	1:10							
D	Ward 621		33.89	6.64	40.52	23.2%	84%		Ambulatory day case infusion/chemotherapy									
D	Ward 622	36	27.87	16.46	44.33	23.2%	63%	100%	1:54	1:5.4	1:9	Twilight part shift on night shift Unit includes Acute Oncology Assessment Unit						

D	Ward 623	28	23.77	7.79	30.95	23.2%	77%	100%	1: 4.5	1:4.5	1:7	1:5.5 Day Shifts Friday & Saturday	1:7	1:7	1:7	1:9	
D	Ward 624	36	25.48	14.89	40.37	23.2%	63%	100%	1:6	1:6	1:9	No weekend variation					
D	Ward 625	32	31.83	11.67	43.5	23.2% %	73%	100%	1:7	1:7	1:5.5						
D	Burns Centre	15	24.02	7.19	31.21	23.2%	77%	100%	1:2.14	1:3.75	1:3.75	Burns Unit , Twilight part shift on night shift					
D	Oncology Outpatients	NA	7.55	8.88	16.43	23.2%	46%	Oncology Outpatient Department									
D	Haematology Outpatients	NA	2	2.8	4.8	Haematology Outpatient Department											