

# Staffing: Nursing, midwifery and care staff

June 2015

South Tyneside NHS Foundation Trust has led the way in the North East with our Open and Honest programme and is determined to take the same approach with Open and Honest Staffing.

The monthly report identifies staffing fill rates to demonstrate nursing and midwifery and care staffing levels. Fill rates of 100% mean that all planned staff were on duty. Fill rates of greater than 100% represent increased staffing levels to meet unplanned demand to meet patient care needs. Fill rates of less than 100% reflect unplanned sick leave, vacancies or when staff are moved to work in another clinical area due to low occupancy rates on their area, or where demands are higher in another area.

Where there are fill rates of less than 80% or above 150% we have provided additional information relating to that area to outline the reasons for this.

We make reference to the bed occupancy where this is relevant. Bed occupancy identifies how many patients we cared for on that ward or unit at midnight over the calendar month. It identifies how many beds are occupied by patients at midnight and this is converted to a % based on the number of beds available for that ward / unit. The lower the percentage the more empty beds there were over the calendar month. When there is reduced bed occupancy this can be a reason why the fill rates are lower than planned.

## These are the overall Trust figures (South Tyneside District Hospital, Primrose Hill Hospital, Monkton Hall Hospital and St Benedict's Hospice)

Trust	Day		Night	
	Average fill rate - registered nurses/ midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/ midwives (%)	Average fill rate - care staff (%)
South Tyneside NHS Foundation Trust	86.2%	94.0%	96.5%	104.6%

Ward name	Day		Night	
	Average fill rate - registered nurses/ midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/ midwives (%)	Average fill rate - care staff (%)
ASU - Acute Stroke Unit	84.3%	93.8%	98.2%	103.2%
EAU - Emergency Admission Unit	86.3%	123.7%	100.0%	100.0%
ITU / HDU	82.2%	N/A	99.3%	N/A
Primrose Ward	83.7%	46.1%	76.7%	80.4%

*During June, Primrose ward was still operating with staffing levels that could manage additional beds if this became necessary. These beds were only occasionally utilised and the actual staffing levels were therefore reduced and staff redeployed to other areas. This redeployment of staff has led to the low fill rates on some shifts.*

<b>Special Care Baby Unit</b>	<b>72.5%</b>	<b>43.8%</b>	<b>88.3%</b>	<b>70.0%</b>
<p><i>SCBU has a small team of nursing staff therefore small changes staff numbers have a disproportionate effect on fill rates. The number of staff required has increased recently increased due to the requirement for staff to take unpaid breaks; this has had an impact on the fill rates causing them to reduce. Paediatric nurses are supporting the unit by providing cover. The occupancy of SCBU has been low during June with no babies at all on the unit between June 16th and July 1st. Some staff were redeployed to other areas during this time reducing the fill rates. Every shift in June included a qualified neonatal nurse when there were babies present on the unit.</i></p>				
<b>Ward 1</b>	<b>88.3%</b>	<b>116.2%</b>	<b>96.7%</b>	<b>123.3%</b>
<b>Ward 10</b>	<b>79.9%</b>	<b>97.9%</b>	<b>100.0%</b>	<b>132.2%</b>
<p><i>Registered nurse fill rates for ward 10 were reduced on day duty due to short term sickness and maternity leave. The ward was supported during this time with bank nurses and nurses working extra hours; care staff numbers were optimal during this period.</i></p>				
<b>Ward 19</b>	<b>94.5%</b>	<b>80.8%</b>	<b>103.3%</b>	<b>101.7%</b>
<b>Ward 2</b>	<b>87.1%</b>	<b>102.8%</b>	<b>100.0%</b>	<b>121.7%</b>
<b>Ward 3</b>	<b>81.1%</b>	<b>96.1%</b>	<b>100.2%</b>	<b>98.3%</b>
<b>Ward 5</b>	<b>87.5%</b>	<b>95.9%</b>	<b>99.7%</b>	<b>106.6%</b>
<b>Ward 6 / CCU (Coronary Care Unit)</b>	<b>79.1%</b>	<b>115.6%</b>	<b>99.3%</b>	<b>103.3%</b>
<p><i>The fill rates for registered nurses on days on ward 6 during June were affected by a combination of vacancies, maternity leave and long term sick leave. The ward was supported during this time with bank nurses and nurses working extra hours. Recruitment is underway to fill vacancies as quickly as possible and one member of staff is due back from maternity leave in July.</i></p>				
<b>Ward 7</b>	<b>86.8%</b>	<b>138.2%</b>	<b>100.8%</b>	<b>100.8%</b>
<b>Ward 9</b>	<b>98.3%</b>	<b>87.7%</b>	<b>85.0%</b>	<b>133.3%</b>
<b>Delivery Suite</b>	<b>88.4%</b>	<b>86.8%</b>	<b>94.9%</b>	<b>80.0%</b>
<b>Ward 22</b>	<b>105.1%</b>	<b>88.1%</b>	<b>95.2%</b>	<b>100.0%</b>
<b>Elmville</b>	<b>121.2%</b>	<b>103.5%</b>	<b>94.2%</b>	<b>113.5%</b>
<b>St Benedicts</b>	<b>83.6%</b>	<b>64.9%</b>	<b>100.0%</b>	<b>100.0%</b>
<p><i>Staff sickness affected the fill rates on day duty for care staff. Staff worked additional hours in order to manage demand safely. One care staff vacancy was filled in June and the nurse will be in post as soon as possible.</i></p>				