

Open and Honest Care in your Local Hospital



Safe Staffing



Report for:

The Christie

NHS Foundation Trust

Oct-16

Open and Honest Care at The Christie NHS Foundation Trust:

Safe Staffing Report - October 2016

The Christie specialises in cancer treatment, research and education and is the largest cancer centre in Europe. Treating 44,000 patients a year from across the UK, it became the first UK centre to be officially accredited as a comprehensive cancer centre and has its own dedicated hospital charity. The Christie employs 2,750 staff, all of whom are determined to provide the best possible cancer care and patient experience. Our organisation is committed to improving quality and delivering safe, effective and personal care, within a culture of learning and continuous service improvement.

Getting the right staff with the right skills to care for our patients all the time is our priority

This report is based on information from October 2016. The information is presented in three key categories: planned vs actual staffing, hospital overview, breakdown by ward and any actions taken. This information is complimented by the bed occupancy of the Trust which enables the senior nurse to make informed decisions on where to place a patient based on patient acuity, clinical speciality and ward staffing levels.

NB: This report should be read in conjunction with the Open and Honest Care - Patient Harms Report for the corresponding month.

Staffing levels

Planned vs Actual Hospital Overview

Planned staff means the number of staff, both registered nurses and care staff, required for each shift identified within the current funded establishment.

Actual staff means the number of staff, both registered nurses and care staff, in attendance for each shift

		DAY	NIGHT
		Hours	Hours
Registered Nurses	Total monthly PLANNED	16226	11516.5
	Total monthly ACTUAL	15424.5	10956.5
	Average Fill Rate %	95.1%	95.1%
Care Staff	Total monthly PLANNED	7289.5	2816.5
	Total monthly ACTUAL	6972	2851
	Average Fill Rate %	95.6%	101.2%
ALL Staff	Total monthly PLANNED	23515.5	14333
	Total monthly ACTUAL	22396.5	13807.5
	Average Fill Rate %	95.2%	96.3%

Breakdown per ward

Registered Nurses

	DAY			NIGHT		
	Hours Planned	Hours Actual	% Fill Rate	Hours Planned	Hours Actual	% Fill Rate
Critical Care Unit	1697.5	1565	92.2%	1625	1587.5	97.7%
Palatine Ward	3406	3152.5	92.6%	2587.5	2300	88.9%
Ward 10	1704	1668	97.9%	1375	1375	100.0%
Ward 11	2125	1975	92.9%	1421.75	1410	99.2%
Ward 12	2325	2293	98.6%	1457	1445.25	99.2%
Ward 4	2710.5	2603.5	96.1%	1656.75	1445.25	87.2%
Oncology Assessment Unit	1403	1312.5	93.5%	637.5	637.5	100.0%
Ward 1	855	855	100.0%	756	756	100.0%
TOTAL	16226	15424.5	95.1%	11516.5	10956.5	95.1%

Care Staff

	DAY			NIGHT		
	Hours Planned	Hours Actual	% Fill Rate	Hours Planned	Hours Actual	% Fill Rate
Critical Care Unit	470	470	100.0%	37.5	37.5	100.0%
Palatine Ward	1209	1157	95.7%	800	800	100.0%
Ward 10	1165	1090	93.6%	400	400	100.0%
Ward 11	1116.5	1081.5	96.9%	376	481.75	128.1%
Ward 12	1206.5	1150.5	95.4%	352.5	340.75	96.7%
Ward 4	1245	1197	96.1%	564	517	91.7%
Oncology Assessment Unit	492	476	96.7%	262.5	250	95.2%
Ward 1	385.5	350	90.8%	24	24	100.0%
TOTAL	7289.5	6972	95.6%	2816.5	2851	101.2%

Action taken

Throughout October 95.6% of the required hours were filled with the planned numbers of registered nurses and care staff.

Where the actual staff numbers were less than the planned staff numbers the ward team followed an agreed escalation process based on the acuity and dependency of care required and a review of the bed occupancy. This has included using the hospital bank to support the patient acuity levels. There are daily planned staffing reviews as well as a review of the hospitals activity.

Two wards show a fill rate of less than 90% for registered staff on overnight shifts. On both wards this was due to a combination of sickness and vacancies. Both wards were assessed daily for acuity and dependency and at no point either ward was left at an unsafe staffing level.

During this month the ward leaders and Matrons did not escalate any staffing issues to the Director of Nursing & Quality. Where actual staffing numbers were less than planned the staff followed an agreed escalation process based on the acuity and dependency of care required.