

MEETING OF THE TRUST BOARD			
SAFE NURSE STAFFING LEVELS APRIL 2016			AGENDA ITEM 2.1
<b>Paper Author &amp; Job Title:</b>	Dawn Parkes, Deputy Chief Nurse for Practice and Professional Development and Sharon Payne, Matron for Nurse Staffing		<b>Responsible Director:</b> David Melia, Interim Acting Chief Nurse
<b>Purpose (Highlight)</b>	<b>Approval</b>	<b>Decision</b>	<b>Assurance and Information</b>
			<b>To receive and discuss</b>
<b>Action Required</b>	Review the current inpatient ward staffing position		
<b>Does this paper mitigate risk included in the Trust Risk Registers? please outline</b>	<p>Maintaining safe nurse staffing levels are fundamental to providing high quality safe care to patients.</p> <p>The position in the Division of Emergency and Elective Services; Medicine, and Surgery requires monitoring; although the net staffing position will improve following successful recruitment programmes, the time delay in start dates is of concern.</p> <p>When shortfalls occur - staffing numbers across adult in-patient areas are appropriately reported and risk assessed. These processes occur twice daily and are documented.</p>		
<b>Resource implications</b>	None resulting specifically from this paper		
<b>Legal and Equality and Diversity implications</b>	None noted		
<b>Striving for Excellence Breakthrough Objectives</b>	Become one of the best in the country		
	Keep our patients safe		X
	Live and grow within the resources we have		X
	Develop one another to achieve the best for us and our patients		
	Surpass expectations and build on our reputation		X
<b>Change Programmes</b>	Patient safety and Quality		
	Urgent and Emergency Care		
	Reducing Waiting Times		

	Outpatient Improvement	
	Engagement	
	Meeting the Challenge	
<b>Trust Values</b>	Caring	<b>X</b>
	Respect	<b>X</b>
	High Standards	<b>X</b>
	Improving	<b>X</b>

## Safe Nurse Staffing May 2016

### EXECUTIVE SUMMARY

This report is the regular monthly report to the Trust Board that presents the nurse staffing data for March 2016 for the Trust as a whole and analysed to individual ward level. Maintaining safe nurse and midwifery staffing levels are fundamental to providing high quality safe care to patients. When shortfalls occur - staffing numbers across adult in-patient areas and midwifery are appropriately reported and risk assessed. These processes occur twice daily and are documented.

The report details the current position for adult in-patient wards including vacancy levels and the impact on quality of patient care.

The report also includes a summary of:

- Staffing analysis and exception criteria
- Nursing recruitment risk update
- Inpatient Staffing Tracker

#### Trust overview – March 2016

Staff Type	Budgeted WTE	Contracted WTE	Vacancy WTE
Registered	726.26	628.13	91.21
Unregistered	401	363.89	28.26
<b>Total</b>	<b>1127.26</b>	<b>992.03</b>	<b>135.24</b>

#### Trust overview – January 2016 (as comparison)

Staff Type	Budgeted WTE	Contracted WTE	Vacancy WTE
Registered	731.59	609.57	122.02
Unregistered	400.62	354.39	46.23
<b>Total</b>	<b>1132.21</b>	<b>963.96</b>	<b>168.25</b>

**Dawn Parkes, Deputy Chief Nurse for Practice and Professional Development,  
Sharon Payne, Matron Nurse Staffing**

April 2016

**MID YORKSHIRE HOSPITALS NHS TRUST****Safe Nurse and Midwifery Staffing**

- 1. Purpose of report**
- 2. Safe staffing analysis**
  - 2.1. Safe staffing report**
  - 2.2. Patient quality indicator report**
- 3. Detail**
  - 3.1. Overall staffing position**
- 4. Nursing recruitment risk update**
- 5. Trust staffing overview**
- 6. Inpatient Staffing Tracker**

## 1. Purpose of Report

The report adheres to the recommendations set out by the National Quality Board (NQB): *How to ensure the right people, with the right skills, are in the right place at the right time.* In providing a monthly detailed retrospective data analysis on a shift by shift basis of the planned and actual nurse staffing levels across our in-patient wards within The Mid Yorkshire Hospitals NHS Trust, and is inclusive of Registered Nurses (RN) and Health Care Assistants (HCA).

The Mid Yorkshire Hospitals NHS Trust is committed to striving towards its nursing workforce being efficient and sufficiently robust to deliver high quality, safe and effective care in order to meet the acuity and dependency requirements of patients within our care.

The report details our current position for adult in-patient wards including vacancy levels and recruitment, and impact on quality of patient care.

The report also includes a summary of:

- Staffing analysis and exception criteria
- Nursing recruitment risk update
- Inpatient Staffing Tracker

## 2. Safe Staffing Analysis

The purpose of the Safe Staffing report is to provide a summary at a glance; a rag rated staffing analysis with associated quality indicators. The Safe Staffing report provides an overview of the planned and actual hours worked by grade type throughout March 2016 and the subsequent % fill rate (as per the national Unify staffing return). The % fill rate includes all bank and agency hours worked on the units specified and captures staff movement from all other clinical areas as per the data held on eRostering.

The report highlights the % of actual hours worked that are filled by bank and agency staff. It is important to note that these may be Mid Yorkshire Hospitals NHS Trust substantive staff working via NHSP/Agency.

The patient quality indicator report demonstrates the wards performance in relation to key quality indicators and how this performance compares to the previous three months data.

Overall key concerns are areas where the staffing fill rate has fallen below 80% (highlighted red on the report) and understanding the impact this has on patient care.

There are several challenges affecting staffing levels and this is driven by vacancies, sickness, maternity leave and the management of other unavailability, all of which reduce available clinical nursing hours, as well as staffing surge capacity beds.

During March 2016, there was one reported incidence of Trust attributable MRSA identified on Gate 34 PGH. This is the first reported incidence for seven months. There was one category 3 pressure ulcers reported on Ward 2 DDH, and outliers in relation to category 2 pressure ulcers including Gate 12 PGH, Acute Assessment Unit, and falls with harm on Gate 12 PGH, Acute Assessment unit.

Please note that all pressure ulcers included within the report are hospital acquired pressure ulcers.

## 2.1 Safe Staffing Report

March 16 Monthly Safe Staffing Report																
Unit	Day								Night							
	Planned RN	Actual RN	Planned HCA	Actual HCA	% RN	% RN Bank & Agency	% HCA	% HCA Bank & Agency	Planned RN	Actual RN	Planned HCA	Actual HCA	% RN	% RN Bank & Agency	% HCA	% HCA Bank & Agency
<b>Division of Medicine</b>																
Gate 12 PGH, Acute Assessment	3836	3032.34	1955	1352.48	79.0%	16.0%	69.2%	35.1%	3496	2967.00	1782.5	1638.00	84.9%	44.0%	91.9%	42.1%
Gate 21 PGH, Haematology	1242	827.41	356.5	288.00	66.6%	4.3%	80.8%	16.5%	713	691.83	356.5	348.00	97.0%	1.7%	97.6%	27.3%
Gate 31a & Gate 11 PGH, Cardiology	2578	1881.54	1426	1029.00	73.0%	3.1%	72.2%	15.1%	2139	1996.00	1069.5	1032.48	93.3%	31.4%	96.5%	16.5%
Gate 41 PGH, Elderly Care	1463.5	1254.15	2139	2346.79	85.7%	1.4%	109.7%	20.9%	1069.5	1009.50	1782.5	1880.00	94.4%	41.3%	105.5%	45.6%
Gate 42 PGH, Elderly Care	2161.5	1447.15	1426	1902.55	67.0%	2.8%	133.4%	9.7%	1426	1305.50	1069.5	2154.25	91.5%	54.1%	201.4%	41.0%
Gate 43 PGH, Elderly Care	1600	1450.92	2001	2098.29	90.7%		104.9%	26.2%	1138.5	1181.50	1357	1507.00	103.8%	16.6%	111.1%	40.7%
Gate 44 PGH, Gastroenterology	1835	1432.21	945.5	835.44	78.0%	6.0%	88.4%	21.1%	1426	1352.50	713	789.50	94.8%	20.6%	110.7%	19.6%
Gate 45 PGH, Respiratory	2191.5	1770.82	1782.5	1458.65	80.8%	5.2%	81.8%	17.8%	1426	1347.75	1069.5	1045.00	94.5%	15.8%	97.7%	13.0%
Gate 45a PGH, Acute Care	1448.5	1189.17		6.50	82.1%	1.1%		100.0%	1426	1095.25		23.00	76.8%			100.0%
Gate A1 PGH, Stroke Rehab	1182	791.53	713	388.48	67.0%	4.0%	54.5%	12.5%	713	691.00	713	630.00	96.9%	5.1%	88.4%	35.2%
Gate A2 PGH, Stroke & Neurology	2341.5	1970.75	1533.5	2774.00	84.2%	0.6%	180.9%	2.6%	1426	1407.00	713	974.80	98.7%	13.4%	136.7%	10.9%
Gate A4 PGH, Spinal Injuries	1658.5	1116.36	1720.5	1423.46	67.3%	7.5%	82.7%	6.3%	1069.5	1088.00	713	609.50	101.7%	25.5%	85.5%	
Ward 10 DDH, Short Stay	1842.5	1293.96	1069.5	700.94	70.2%	12.9%	65.5%	33.9%	1069.5	1065.00	713	713.00	99.6%	27.4%	100.0%	24.2%
Ward 11 DDH, Medical Assessment	2052.5	1536.85	1426	1093.95	74.9%	19.5%	76.7%	5.1%	1426	1301.50	713	655.50	91.3%	24.0%	91.9%	
Ward 2 DDH, Elderly Care	1144.5	1089.82	713	1606.44	95.2%	12.8%	225.3%	7.9%	713	982.50	713	1389.75	137.8%	30.9%	194.9%	7.5%
Ward 4 DDH Stroke & Neurology	1471	1095.20	1069.5	932.21	74.5%	20.1%	87.2%	6.5%	1069.5	1026.50	713	1037.50	96.0%	33.9%	145.5%	41.4%
Ward 6 DDH, Gastroenterology	1456	1101.97	885.5	721.94	75.7%	14.2%	81.5%	35.2%	1069.5	1066.50	713	621.00	99.7%	48.9%	87.1%	20.4%
Ward 8 DDH, Respiratory	1471	1135.06	899	677.75	77.2%	15.4%	75.4%	11.4%	1069.5	1001.50	713	670.00	93.6%	36.8%	94.0%	21.0%
<b>Division of Surgery</b>																
Critical Care DDH, Intensive Care	3231	3118.84	1069.5	820.90	96.5%	31.9%	76.8%	11.0%	3208.5	3067.00	667	414.00	95.6%	38.1%	62.1%	33.3%
Elective Orthopaedic Suite PGI	952	696.00	852	573.00	73.1%		67.3%		713	507.00	69	138.50	71.1%	13.8%	200.7%	
Gate 28 PGH, Plastics	810.5	787.48	461.5	324.23	97.2%	4.4%	70.3%	5.5%	713	714.00			100.1%	3.4%		
Gate 29 PGH, Burns	1207.5	1047.44	356.5	164.48	86.7%	6.8%	46.1%	10.6%	713	782.00			109.7%	10.3%		
Gate 30 PGH, Intensive Care	4350.5	4376.96	356.5	333.50	100.6%	6.1%	93.5%		4634.5	4207.02	356.5	126.50	90.8%	9.7%	35.5%	
Gate 32 PGH, Surgical Assessment	1955	1998.75	713	626.50	102.2%	18.7%	87.9%	39.8%	1426	1732.50	356.5	340.50	121.5%	63.2%	95.5%	67.2%
Gate 32a PGH, Orthopaedics	750.5	742.97	713	743.36	99.0%	3.2%	104.3%	22.6%	713	694.00	356.5	438.50	97.3%	38.7%	123.0%	52.8%
Gate 33 PGH, Surgery	2034.5	1679.88	1426	1260.42	82.6%	7.5%	88.4%	12.4%	1426	1283.50	977.5	897.50	90.0%	32.7%	91.8%	37.2%
Gate 34 PGH, UroGynae, Enhanced Care	1174.5	1106.50	1069.5	985.48	94.2%	3.8%	92.1%	3.7%	713	712.50	713	701.50	99.9%	6.4%	98.4%	9.8%
Gate 38 PGH, Orthopaedics	765.5	758.48	713	606.75	99.1%	1.6%	85.1%	8.8%	713	718.00	356.5	265.50	100.7%	31.1%	74.5%	52.4%
Ward 12 DDH, Orthopaedics	765.5	671.73	356.5	180.00	87.8%		50.5%		713	525.00	264.5	195.50	73.6%	11.3%	73.9%	
Ward 14 DDH, Gynaecology	1501	1501.10	1069.5	989.00	100.0%	2.0%	92.5%	10.5%	1069.5	1094.50	713	790.00	102.3%	11.9%	110.8%	21.0%
Ward 15 DDH, Surgery	1441	1155.48	1069.5	932.77	80.2%	15.5%	87.2%	5.1%	1069.5	1073.50	713	679.50	100.4%	48.4%	95.3%	35.7%
<b>Care Closer to Home</b>																
Pontefract Intermediate Care Unit	1439.5	1135.96	2371.5	1851.17	78.9%	9.0%	78.1%	41.3%	1069.5	1041.00	1357	1320.00	97.3%	27.1%	97.3%	46.9%
Wakefield Intermediate Care Unit	885.5	862.71	1426	1347.98	97.4%	5.8%	94.5%	0.9%	713	700.00	713	833.00	98.2%	63.9%	116.8%	42.0%

## 2.2 Patient Quality Indicator Report

Unit	Falls with Harm			c-diff			MRSA			Pressure sores			SI			NE			Datix reported staffing levels	Complaints				
	Jan	Feb	Mar	Jan	Feb	Mar	Jan	Feb	Mar	Cat 2		Cat 3		Jan	Feb	Mar	Jan	Feb		Mar	Formal	Informal		
										Jan	Feb	Mar	Jan										Feb	Mar
<b>Division of Medicine</b>																								
Gate 12 PGH, Acute Assessment	5	5	6							3	6	5				1	1					1		
Gate 21 PGH, Haematology		1	1							1	3	1		1										
Gate 31a & Gate 11 PGH, Cardiology	1					1				2	5	1										2		
Gate 41 PGH, Elderly Care	2	1	2								2											1	1	
Gate 42 PGH, Elderly Care	1	2	1							2	3	5										23	1	
Gate 43 PGH, Elderly Care	3	4	3							5	2	3				1	1					2		
Gate 44 PGH, Gastroenterology	2	1	1		1						1	1						1						2
Gate 45 PGH, Respiratory	2	2								3		2				1						1	3	
Gate 45a PGH, Acute Care										2	2	4										49		
Gate A1 PGH, Stroke Rehab			3							2	2											1		
Gate A2 PGH, Stroke & Neurology	1	2		1							2	1												
Gate A4 PGH, Spinal Injuries	1	1	2																			1	1	
Ward 10 DDH, Short Stay		4	5							3	4	2										2	3	
Ward 11 DDH, Medical Assessment		3	2							2		1										1		
Ward 2 DDH, Elderly Care		2	2	2		1				6	2	1		1	1									
Ward 4 DDH Stroke & Neurology	3	2	1	1							1													
Ward 6 DDH, Gastroenterology	1	1	1									1										1		
Ward 8 DDH, Respiratory	1	2	1							1								1						
<b>Division of Surgery</b>																								
Critical Care DDH, Intensive Care										5	7	2										1		
Elective Orthopaedic Suite PGI		1									1	2												
Gate 28 PGH, Plastics	1	1								1		2												
Gate 29 PGH, Burns		1																						
Gate 30 PGH, Intensive Care										1	3													
Gate 32 PGH, Surgical Assessment			2							3	1	1												
Gate 32a PGH, Orthopaedics	1	1								1		2										1	1	1
Gate 33 PGH, Surgery	2	2									6	3										1	1	
Gate 34 PGH, UroGynae, Enhanced	1		2				1			3		1												2
Gate 38 PGH, Orthopaedics											2													
Ward 12 DDH, Orthopaedics										1		1										1		
Ward 14 DDH, Gynaecology	1		2			1				1	2	1											2	
Ward 15 DDH, Surgery	1	2	1								2											1	2	
<b>Care Closer to Home</b>																								
Pontefract Intermediate Care Unit		3								4	1													
Wakefield Intermediate Care Unit	2	3								1	1				1									
<b>Total</b>	<b>32</b>	<b>50</b>	<b>35</b>	<b>4</b>	<b>1</b>	<b>3</b>			<b>1</b>	<b>48</b>	<b>62</b>	<b>47</b>		<b>2</b>	<b>1</b>	<b>1</b>	<b>5</b>	<b>2</b>				<b>86</b>	<b>14</b>	<b>9</b>



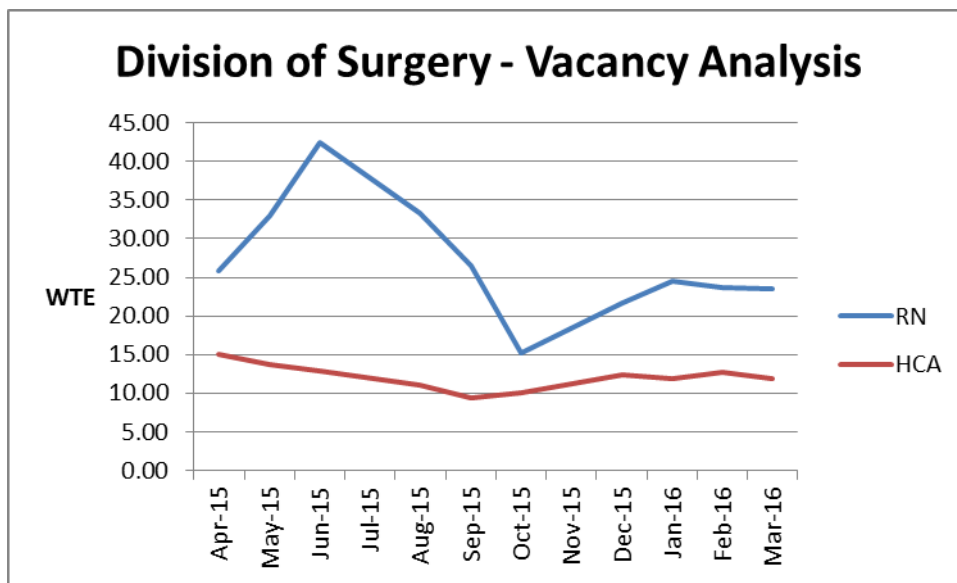
### 3. Detail

#### 3.1. Overall Staffing Position

The following information provides the month on month vacancy analysis for the Division of Elective and Emergency services - Medicine and Surgery and the two Intermediate Care bedded units Pontefract Intermediate Care (previously known as Monument House based and Wakefield Intermediate Care Unit (Queen Elizabeth House) within Community's Care Closer to Home Service.

#### Division of Surgery Inpatient Ward Vacancy Information WTE

The Division of Surgery vacancy position demonstrates a marginal improved position at 23.46 WTE (8.3%). To note that there are currently 3.0 WTE International Nurses working within the surgical areas, which have been included in the RN staffing position. The vacancy position for the HCAs has reduced to 11.86 WTE (10.1%), however following a recent recruitment event the vacancy concern is resolved with all vacant HCA posts filled.



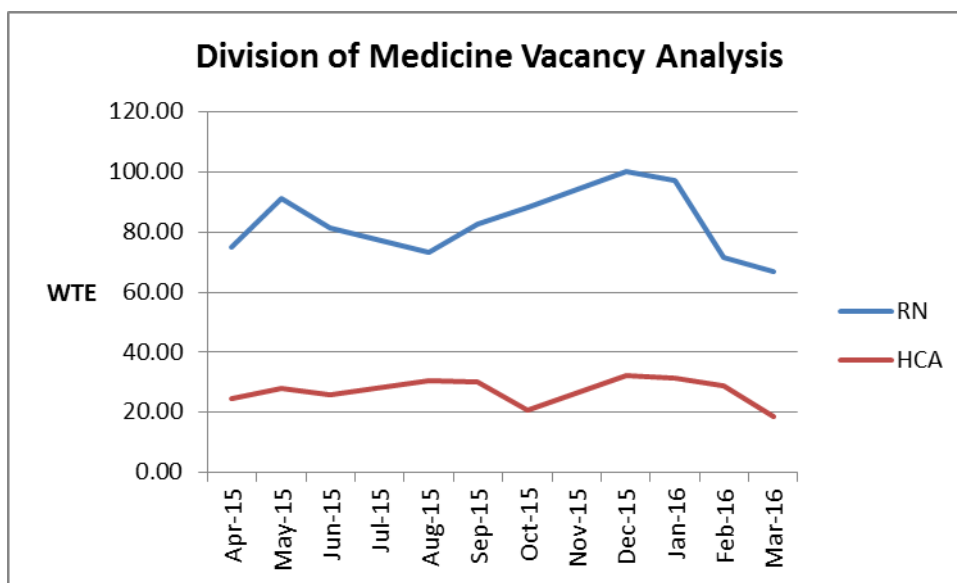
	Apr-15	May-15	Jun-15	Aug-15	Sep-15	Oct-15	Dec-15	Jan-16	Feb-16	Mar-16
RN	25.79	33.03	42.45	33.33	26.58	15.17	21.60	24.53	23.71	23.46
HCA	15.07	13.66	12.87	10.99	9.44	10.03	12.37	11.86	12.78	11.86

#### Division of Medicine Inpatient Ward Vacancy Information WTE

The Division of Medicine RN vacancy position continues to decrease to 66.87 WTE (15.8%) of which 17 WTE are International Nurses working across the wards within the division. The HCA vacancies levels continue to improve and are now 18.47 WTE (7.2 %). Following a recent HCA recruitment event all vacant posts have been filled, and are expected to be in post within 8 weeks.

It is important to note that there are currently 6.92 WTE RN and 8.84 WTE HCA substantive staff covering the surge capacity wards on a permanent basis. These staff are supported by bank and agency staff in providing care for the additional 100 beds that are currently open in the Trust. Staff from the other substantive units with the Trust, are regularly moved to the surge capacity wards to help provide care and this impacts on the ability to cover the hours required on the base wards.

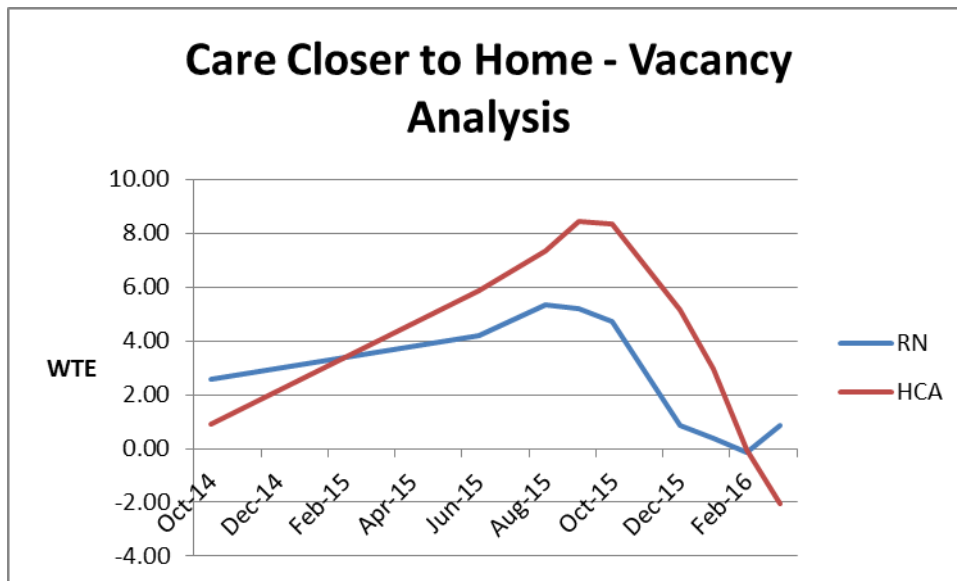
Following the inpatient staffing review the Trust Board supported the decision to convert 20.95 WTE Band 5 RN to Band 4 Assistant Practitioners. This will reduce the RN vacancy position by 20.95 WTE; these vacancies are currently progressing through the recruitment process. Other significant skill mix changes affecting the staffing establishments will take effect in next month's finance report and will therefore impact the vacancy position.



	Apr-15	May-15	Jun-15	Aug-15	Sep-15	Oct-15	Dec-15	Jan-16	Feb-16	Mar-16
<b>RN</b>	74.95	91.13	81.52	73.16	82.51	88.12	100.02	97.11	71.62	66.87
<b>HCA</b>	24.35	27.90	25.92	30.74	30.21	20.86	32.29	31.41	28.64	18.47

### Intermediate Care Inpatient Ward Vacancy Information WTE

The Intermediate Care RN vacancy position has increased to 0.88 WTE (4.1%)  
 The HCA position currently shows an overstaffing of 2.07 WTE (6.7%). The funding to resource the extra capacity in the newly reconfigured Intermediate Care facilities will not impact until May 2016.



	Oct-14	Jun-15	Aug-15	Sep-15	Oct-15	Dec-15	Jan-16	Feb-16	Mar-16
RN	2.60	4.21	5.33	5.21	4.71	0.88	0.38	-0.12	0.88
HCA	0.92	5.88	7.36	8.44	8.36	5.16	2.96	-0.04	-2.07

#### 4. Nursing recruitment risk update

The Trust continues to engage in robust recruitment, both domestic and international and across all grade types, a summary of current progress is shown below, please note that projections may change due to the recruitment process as per the caveats noted in the inpatient tracker:

- International and Domestic Recruitment: EU and Non EU, please see tracker for start dates
- Return to the NHS and return to Practice: 7 RN due to commence in June 2016
- Student Nurse Recruitment: 50 RN in total due to qualify in September 2016 offered and accepted posts
- HCA recruitment: 37 currently proceeding through recruitment process.
- Safety Support Worker Recruitment (Band 1) which will replace the current Ensign Safety Guardian role: 44 WTE currently proceeding through recruitment.
- Band 4 Assistant Practitioner (AP): 20.98WTE RN vacancies have been converted to Band 4 AP, recruitment commenced in March with interviews scheduled for April.

#### 5. Trust wide staffing overview

The data below provides the vacancy position for the inpatient areas, as of the end of March 2016. The Band 7 Unit Managers are excluded due to their supervisory capacity. It is important to note that there is a number of

substantive staff currently placed on surge capacity wards (not included in the report): RN 6.92 WTE and HCA 8.84 WTE which is adversely affecting the divisional vacancy position below.

The unavailability figure included in the table is the % of contracted hours lost throughout March due to staff absence, which includes sickness, maternity, annual leave, working days i.e. supervision and 'other' leave i.e. carers leave, bereavement leave etc. Each area has headroom built into the budgeted establishment to account for this unavailability which is currently set at 22% in total. Any unavailability that exceeds this 22% will create additional staffing pressure on the wards, which may result in elevated bank and agency spend.

## Nurse Staffing Data for March 2016

### Trust Overview

Staff Type	Budgeted WTE	Contracted WTE	Vacancy WTE	% Unavailability (Tolerance 22%)
Registered	726.26	628.13	91.21	31.3%
Unregistered	401	363.89	28.26	32.6%
<b>Total</b>	1127.26	992.03	135.24	31.8%

### Division of Medicine Overview

Staff Type	Budgeted WTE	Contracted WTE	Vacancy WTE	% Unavailability (Tolerance 22%)
Registered	421.28	347.49	66.87	34.9%
Unregistered	253.08	225.77	18.47	32.8%
<b>Total</b>	674.36	573.26	85.34	34.1%

### Division of Surgery Overview

Staff Type	Budgeted WTE	Contracted WTE	Vacancy WTE	% Unavailability (Tolerance 22%)
Registered	283.64	260.18	23.46	27.2%
Unregistered	117.25	105.39	11.86	30.5%
<b>Total</b>	400.89	365.57	35.32	28.1%

**Care Closer to Home Overview**

<b>Staff Type</b>	<b>Budgeted WTE</b>	<b>Contracted WTE</b>	<b>Vacancy WTE</b>	<b>% Unavailability (Tolerance 22%)</b>
<b>Registered</b>	21.34	20.46	0.88	24.0%
<b>Unregistered</b>	30.67	32.74	-2.07	38.3%
<b>Total</b>	52.01	53.20	-1.19	32.8%

**7. Inpatient Staffing Tracker**

The Inpatient Staffing Tracker provides data relating to the registered nurse forecast from September 2015 until August 2016, detailing the actions that will impact on the registered nurse overall position and the assumptions made when collating the data.

## Mid Yorkshire Hospitals NHS Trust

## Registered Nursing Numbers (Inpatient Areas ONLY)

ACTUAL	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17
Establishment WTE Actual	749.8	739.5	716.3	737.1	730.8	746.3	726.3												
Staff In Post WTE Actual	635.5	631.5	604.4	614.6	609.1	632.1	628.1												
Vacancies Actual*	114.3	108.0	111.9	122.5	121.7	114.2	98.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
<b>FORECAST</b>																			
Establishment WTE Forecast	750.0	750.0	747.0	747.0	747.0	747.0	747.0	747.0	747.0	747.0	747.0	747.0	747.0	747.0	747.0	747.0	747.0	747.0	747.0
Staff In Post WTE Forecast	613.4	648.0	634.0	617.3	618.5	612.6	642.6	635.6	647.1	648.9	668.4	665.9	667.4	678.9	673.4	667.9	662.4	660.9	659.4
Vacancies Forecast	136.6	102.0	113.0	129.8	128.5	134.4	104.5	111.4	99.9	98.1	78.6	81.1	79.6	68.1	73.6	79.1	84.6	86.1	9.6
<b>VACANCIES</b>																			
Vacancies Actual vs Forecast	-22.3	6.0	-1.1	-7.3	-6.8	-20.2	-6.3												
<b>Key Recruitment Events Timetable - FORECAST</b>																			
AHR			-3.0																-78.0
Domestic Recruitment Campaign	5.0	5.0	5.0	5.0	5.0	2.0	4.0	4.0	3.0	5.0	5.0	5.0	5.0	5.0	5.0	5.0	5.0	5.0	5.0
Student Nurse Recruitment		14.0	4.0	1.0										17.0					
Return to NHS											4.0								
Non-EU Recruitment (60)*						7.00	13.00	8	4	11	5	3	7						
EU Nurse Recruitment (Target = 45)				2.00	1.00	1.00		2	11	12	16								
Corporate Nurse Support					4.4						-4.4								
Ward Managers				11.3							-11.3								
Turnover - EU Nurses (45%)											-4.0	-4.0	-4.0	-4.0	-4.0	-4.0	-4.0	-4.0	-4.0
Turnover 1.0% = WTE per month	(6.5)	(6.5)	(6.5)	(6.5)	(6.5)	(6.5)	(6.5)	(6.5)	(6.5)	(6.5)	(6.5)	(6.5)	(6.5)	(6.5)	(6.5)	(6.5)	(6.5)	(6.5)	(6.5)
No. reaching 55					3.0	1.0	1.0	3.0	1.0	1.0	1.0	3.0	3.0	2.0	1.0	2.0	1.0	2.0	4.0
<b>Total</b>	<b>(1.5)</b>	<b>12.5</b>	<b>2.5</b>	<b>12.8</b>	<b>3.9</b>	<b>3.5</b>	<b>10.5</b>	<b>7.5</b>	<b>11.5</b>	<b>1.8</b>	<b>19.5</b>	<b>(2.5)</b>	<b>1.5</b>	<b>11.5</b>	<b>(5.5)</b>	<b>(5.5)</b>	<b>(5.5)</b>	<b>(1.5)</b>	<b>(1.5)</b>

\*Confirmed numbers

ACTUAL Starters and Leavers	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17
Domestic Recruitment campaign	3.0	1.0	10.0	2.6	3.8	2.6	3.0												
Student Nurse Recruitment	5.5	3.9																	
Non-EU Recruitment			1.0	1.0	1.0														
EU Recruitment	1.0		1.0	2.0															
Recruitment of return to practice Nurses																			
<b>Total Starters</b>	<b>9.5</b>	<b>4.9</b>	<b>12.0</b>	<b>3.6</b>	<b>6.8</b>	<b>2.6</b>	<b>3.0</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
Non-EU Nurse Turnover							0.8												
EU Nurse Turnover	3.0	1.0	3.0	3.0			2.0												
Age Retirements		1.0			1.0		1.6												
General Turnover	8.1	9.6	5.1	7.2	8.6	5.0	0.8												
<b>Total Leavers</b>	<b>11.1</b>	<b>11.6</b>	<b>8.1</b>	<b>10.2</b>	<b>9.6</b>	<b>5.0</b>	<b>5.3</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>	<b>0.00</b>
<b>Net Change</b>	<b>(1.6)</b>	<b>(6.7)</b>	<b>3.9</b>	<b>(6.6)</b>	<b>(2.8)</b>	<b>(2.4)</b>	<b>(2.3)</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>
<b>No. Pre-Reg Conversions</b>	<b>12.15</b>	<b>6.92</b>	<b>1.00</b>	<b>0.60</b>	<b>1.0</b>	<b>1.0</b>	<b>1.0</b>												

**Assumptions**

- Establishment WTE actual - source: as per Financial Ledger
- Staff in post WTE actual - source: as per nursing paper to Trust Board
- From September Figures ONLY include the Divisions of Medicine, Surgery, Community Services and exclude The
- Registered Nurse figures include Bands 5, 6 & 7 but excludes Unit Managers
- Forecast WTE based on 1.0% staff turnover per month
- AHR reductions relate to changes in establishment NOT Staff in post.
- EU Nurses annual turnover rate of 45%
- Staff in Post WTE Forecast = previous months staff in post + current months Key Events
- \*Vacancies = Establishment - Staff in Post (excluding Bank/Agency Usage)
- As Non EU/EU Nurses have not been allocated a ward they have been included in both Inpatient and Trustwide
- NMC Registration process will take 15 weeks from point of applying to the NMC based on information provided by Search recruitment.
- Non-EU Nurse recruitment of 23 nurses in February, 13 of which have completed ONP and receive their Pin No's in February and the remaining 10 pass their OSCE

**Key Events**

- Non-EU recruitment of 60 Nurses in cohorts between May 2015 to July 2016 - Profile amended in October
- 1 Non-EU nurse failed her OSCE in December and will therefore re-sit in January resulting in a change to the for
- Recruitment of 3 return to practice nurses from September intake
- Removal of -2.99wte for AHR in November due to CCU changes.
- Ongoing recruitment of EU Registered Nurses to reach a target figure of 34 additional nurses.
- Corporate Nursing staff have been allocated a % of clinical time within Inpatient areas for the period December

**Data Confidence (85%)**

- Turnover 1.0% based on the last 12 months historical data, will be reviewed going forward
- Domestic recruitment information based on last 12 months historical data, to be reviewed going forward.
- Potential slippage in update of establishment due to poor completion of ESR forms by managers
- Time lag from establishing posts to actual start date in ESR model
- Profile of Non EU/EU recruitment continually being reviewed.
- The 'Establishment WTE Forecast' needs to be reviewed to reflect; winter beds and AHR bed closures
- AHR figures are based on previous assumptions. A review is currently underway with adjustments to the establishment impacting throughout 2016.
- Differences between Actual SIP figures and net change is due to contractual changes and timing issues.

**Last Updated: 11th April 2016**

**Dawn Parkes, Deputy Chief Nurse for Practice and Professional Development, Sharon Payne, Matron Nurse Staffing April 2016**