



# Monthly Staffing Report of Nursing and Midwifery Levels

**December 2024**

The aim of this paper is to provide assurance to the Quality and Outcomes Committee on how the Trust has discharged its responsibility for ensuring safe staffing.

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The data generated from the e-Rostering system shows that in November 2024 (for the combined inpatient wards) the Trust had rostered 321,065 expected nursing hours, against the number of actual hours worked of 345,026 giving an overall fill rate of 104%.

This month's fill rates are presented below colour coded as improved - green, lower - red (figures in black are equal to the previous month). The key nurse sensitive indicators for inpatient wards are now shown in the [division pages](#).

A further breakdown by ward is included as supplementary data on the Variances tab together with other Key Performance Metrics.

#### Expected Nursing hours

321,065



#### Actual Nursing hours Worked

345,026



In Patient Ward Division	% RN fill rate - day	% HCSW fill rate - day	% RN fill rate - night	% HCSW fill rate - night	% Fill rate
Medicine	101 (98)	130 (120)	108 (104)	143 (123)	119 (110)
Specialised Services	93 (94)	120 (114)	97 (94)	149 (133)	104 (100)
Surgery	105 (102)	109 (111)	108 (106)	118 (122)	109 (108)
Children's	98 (100)	97 (103)	100 (103)	89 (93)	98 (101)
Women's	98 (95)	95 (105)	92 (90)	92 (89)	95 (92)
Weston	96 (95)	119 (113)	102 (99)	142 (134)	113 (108)
UHBW – overall	99 (98)	117 (113)	102 (100)	131 (122)	107 (104)

#### Nurse Fill Rate

107%

The overall Trust fill rate has increased to 107% this month.

The nurse fill rates are based on the funded bed base and do not include any of the boarding patients cared for, this is an additional workload for the ward-based staff.



## Key Factors

- Winter pressures combined with the incidence of flu increased in December leading to the requirement for more escalation beds to be opened and to be safely staffed for prolonged periods. There has also been an increase in demand for patients requiring Enhanced Care provision (ETOC) and at times these shifts have not all been filled. Therefore, a risk assessment based on the staffing for the day is undertaken to ensure safe staffing is maintained across all ward areas.
- Overall, there are no band 5 vacancies for the trust as two Divisions are over recruited, however two divisions do still have some Band 5 vacancies. The trust currently has an overall surplus of 111.51 WTE or -5.9% of the Band 5 establishment.
- The band 5 turnover rate for December stayed the same as October and November at 9.9%. However, the band 2 and 3 turnover rate increased to 13.8%.
- The level of substantive fill compared to Bank and Agency continues to exceed 80% and this month is at 85%. This has reduced the demand for Bank and Agency shifts as the ward establishments are now recruited to turnover.
- The overall fill rates for both RN and HCSW was 100% with both levels increasing in December.
- The second audit using the Safer Nursing Care Tool (SNCT) for adult In-patient wards completed in December (the Autumn review). The results have now been published.

### Vacancy

This month the band 5 vacancy rate decreased to -5.9% compared to -5.4% the previous month.

The HCSW band 2 and 3 combined vacancy rate increased to 13.8% compared to 10.7 the previous month.

[Go to Breakdown by Division - Nurse Vacancy & Turnover](#)

Band  
5  
Vacancy  
Rate

-5.9%

13.8%

Band  
2 & 3  
Vacancy  
Rate

### Turnover

The band 5 turnover rate for December has stayed the same as October and November at 9.9%.

The HCSW band 2 & 3 combined turnover rate for December has increased to 15.9% compared to 15.4% in November.

[Go to Breakdown by Division - Nurse Vacancy & Turnover](#)

Band  
5  
Turnover  
Rate

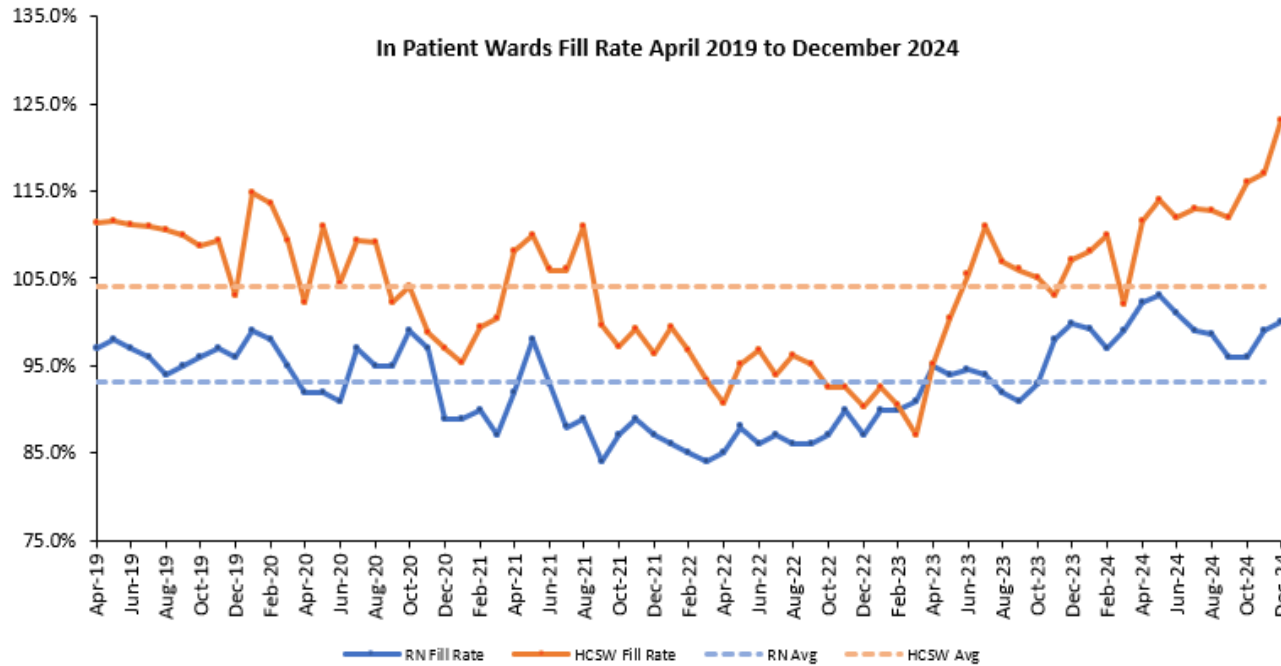
9.9%

15.1%

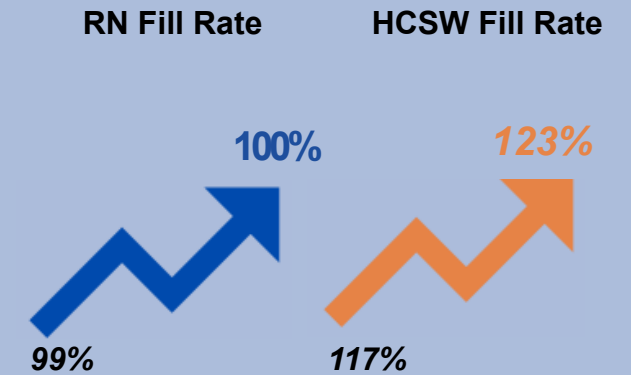
Band  
2 & 3  
Turnover  
Rate



## Overall Trend Fill Rate

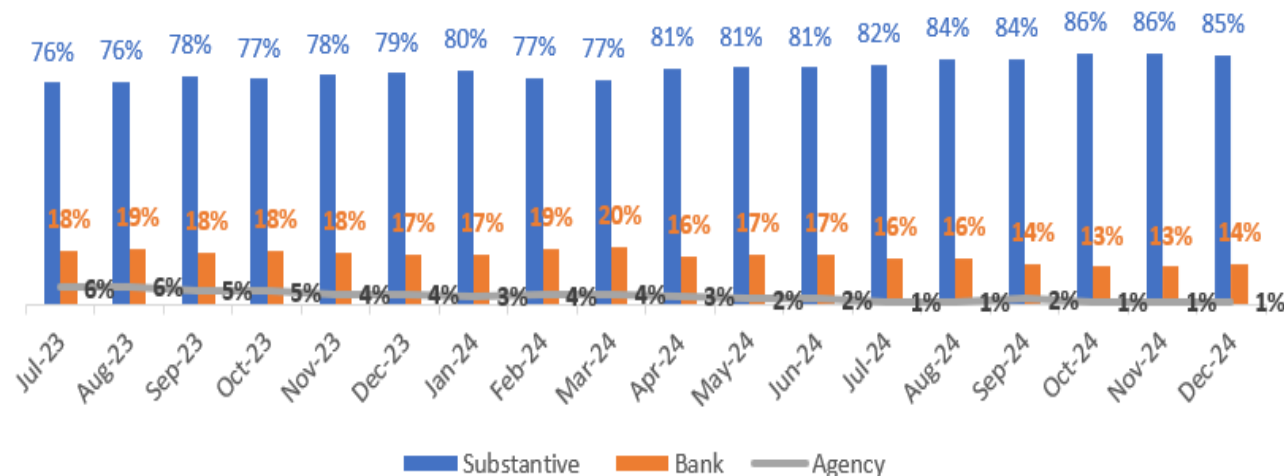


- The RN fill rate for in patient wards has increased to 100%.
- The HCSW fill rate for in patient wards has increased to 123%.
- [Go to Breakdown by Division - Nurse Fill Rates](#)



## Bank and Agency Usage

## In Patient Wards - Substantive, Bank and Agency Usage

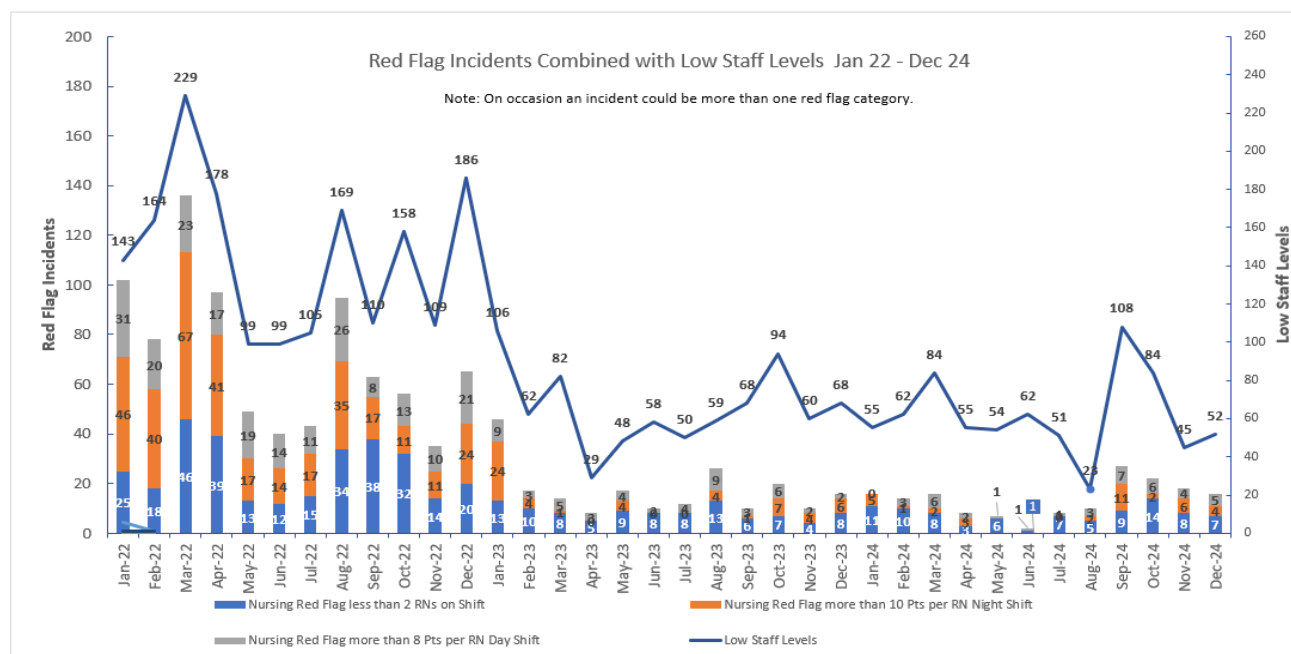


- The graph shows the percentage of staffing of ward substantive, bank and agency for in-patient wards based on actual hours worked.
- The level of usage for substantive staff has increased, whilst the percentage of bank and agency staff has decreased.
- A breakdown by division for this chart can be found in the supplementary documentation.
- This report is based on hours recorded in and generated directly from the e-Rostering system, Optima.



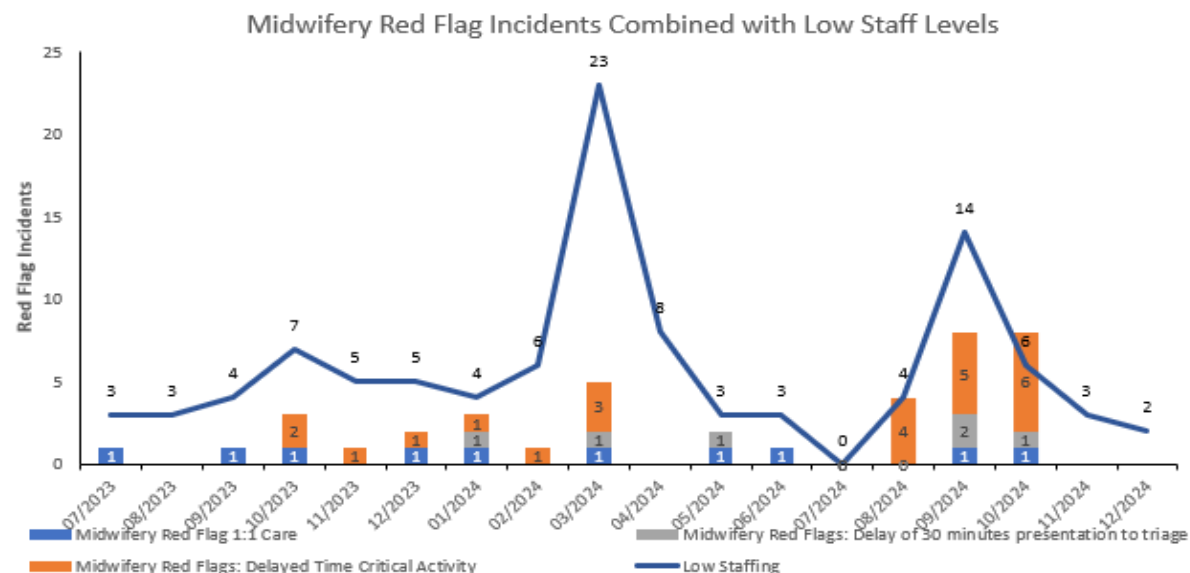
### Red Flag Incidents & Lower than Expected Nursing Levels

- All low staffing and red flag incidents have been reviewed by the Divisional Governance teams.
- The graph shows the trend of reported incidents for December and the previous months.
- The level of reported red flags decreased this month with the majority being reported in the 'less than 2 RN's on shift' category however on review many were incorrectly reported.
- [Go to Breakdown by Division - Low Staffing/Red Flags Incidents](#)



### Midwifery Red Flag Incidents & Lower than Expected Nursing Levels

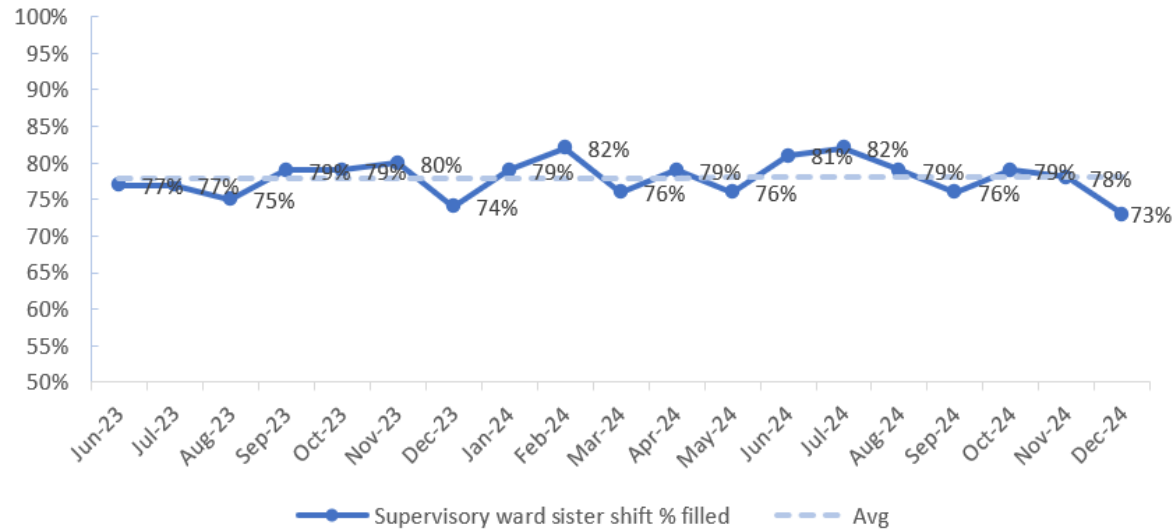
- All maternity low staffing and red flag incidents have been reviewed by the Divisional Governance teams.
- The graph shows the trend of reported incidents for December and previous months.
- There were no Red Flags for Maternity for December.
- [Go to Breakdown by Division - Low Staffing/Red Flags Incidents](#)





### Supervisory Ward Sister Shift Impact

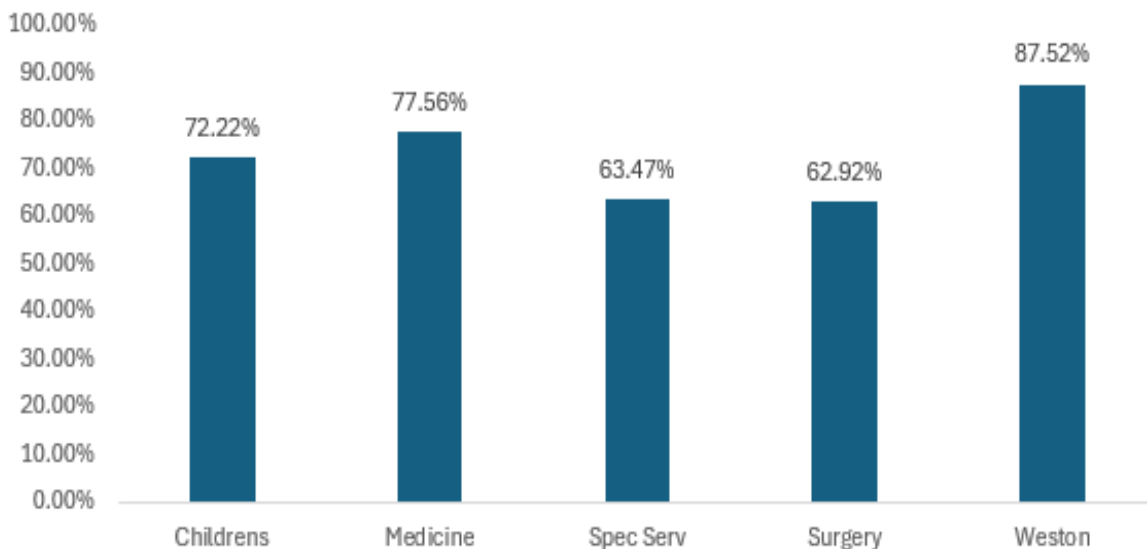
Supervisory Ward Sister Shift % Filled



- The impact on the supervisory ward sister role is demonstrated in the graph as Ward Sisters have joined the numbers to support the clinical workload.
- The Trust's usual expectation is that this role is provided 100% of the time. Ensuring that the Ward Sister role is supervisory in providing clinical support and guidance on the wards is part of the ongoing retention work. This includes covering the Supervisory role when the ward sister is on leave.
- The graph shows an increase in the percentage of supervisory shifts filled in December at 73% compared to 79% in November.
- [Go to Breakdown by Division - Supervisor Impact](#)

### SafeCare Compliance

SafeCare Compliance %



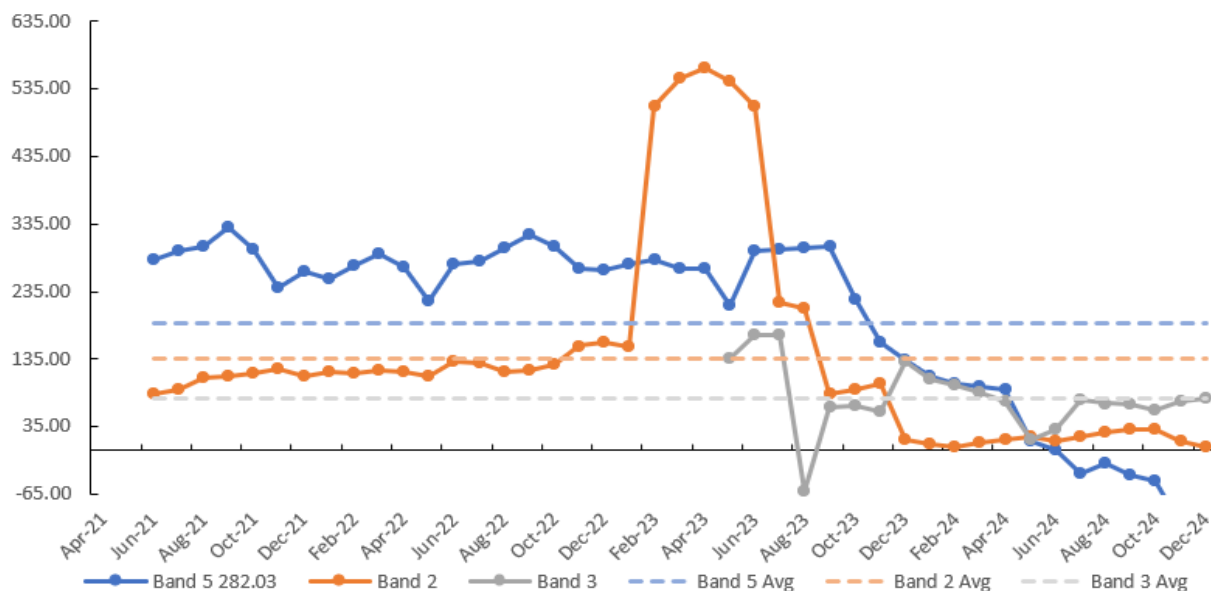
- SafeCare is used shift by shift to manage the nursing resource in adults and children. It is completed 3 times a day to indicate the level of acuity and dependency on in patient wards. This allows matrons to direct additional resources to areas of highest need to ensure patient safety is always maintained.
- The compliance level does vary but is expected to be over 75%.
- Midwifery use a different tool called Birthrate Plus on CDS and the post natal wards, this will be included in next months report. Please refer to the appendix





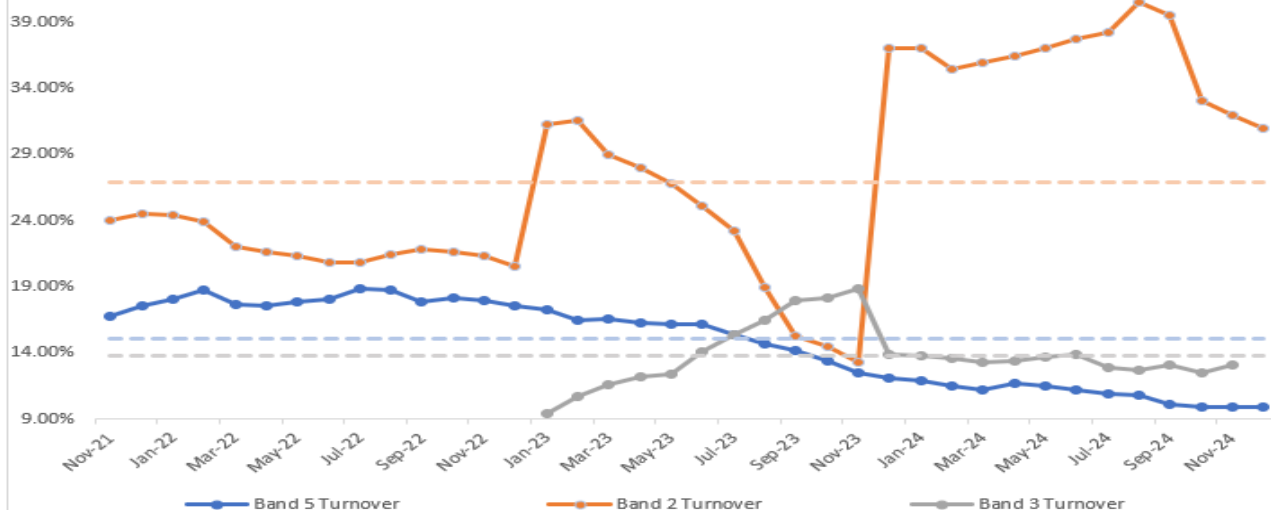
## Nurse Vacancy

Vacancy FTE by month May 2021 - Dec 2024



- The vacancy levels for band 5, band 3 and band 2 are shown in the graph.
- There was a slight increase in Band 5 vacancies compared to last month changing from -109.60 WTE to -102.32.
- The Band 2 vacancies show a decrease from 13.67 WTE to 4.8 WTE.
- The band 3 vacancies show an increase from 73.11 WTE to 77.83.
- The combined vacancies for band 2 and band 3 of 82.78 WTE has decreased from 86.78 WTE last month,

## Nurse Turnover

Band 5, 3 and 2 Turnover by Month.  
Nov 2021 -Dec 2024

- This graph shows the trend for Band 5 and HCSW turnover,
- Band 5 turnover for December has stayed the same since October at 9.9%.
- Band 3 turnover has increased to 13.1% in December compared to 10.8% in November.
- Band 2 turnover has decreased to 32% in December compared to 33.1% in November.
- The combined turnover for band 2 & 3 in December has increased slightly from November to 15.9% from 15.4%



## Medicine

## Spec Serv

## Surgery

## Children's

## Women's

## Weston

## Nurse Fill Rates

Ward				Ward				Ward				Ward				Ward				Ward			
101%	108%	130%	143%	93%	97%	120%	149%	105%	108%	109%	118%	98%	100%	97%	89%	98%	92%	95%	92%	96%	102%	119%	142%
ED				ED BEH				ED BCH				ED BCH				ED BCH				ED Weston			
91%	103%	92%	111%					102%	-		-	88%	96%	85%	45%					96%	98%	101%	103%
RN Days	RN Nights	HCSW Days	HCSW Nights	RN Days	RN Nights	HCSW Days	HCSW Nights	RN Days	RN Nights	HCSW Days	HCSW Nights	RCN Days	RCN Nights	HCSW Days	HCSW Nights	RN/RM Days	RN/RM Nights	HCSW Days	HCSW Nights	RN Days	RN Nights	HCSW Days	HCSW Nights

## Nurse Vacancy &amp; Turnover

Vacancy FTE		Turnover		Vacancy FTE		Turnover		Vacancy FTE		Turnover		Vacancy FTE		Turnover		Vacancy FTE		Turnover		Vacancy FTE		Turnover	
Ward		Ward		Ward		Ward		Ward		Ward		Ward		Ward		Ward		Ward		Ward		Ward	
-39.11	12.7	5.7%	16%	5.22	6.91	10%	17.1%	-9.12	10.27	10.3%	13.7%	-11.1	-2.8	9.3%	20.7%	-7.11	6.32	9.3%	16.9%	-0.03	0.91	11.5%	14.7%
ED		ED		ED		ED		ED BEH		ED BEH		ED BCH		ED BCH		ED BCH		ED BCH		ED Weston		ED Weston	
-15.43	11.46	6.6%	21.6%					-0.47	0	7.8%	-%	6.5	3.12	9.5%	1%					5.24	4.88	19.5%	3.3%
RN	HSCW	RN	HSCW	RN	HSCW	RN	HSCW	RN	HSCW	RN	HSCW	RCN	HSCW	RCN	HSCW	RN/RM	HSCW	RN/RM	HSCW	RN	HSCW	RN	HSCW

## Low Staffing/Red Flags Incidents

Low Staffing		Red Flags		Low Staffing		Red Flags		Low Staffing		Red Flags		Low Staffing		Red Flags		Low Staffing		Red Flags		Low Staffing		Red Flags	
13	1			5	0			10	2			4	0			2	0	2	0	18	4		
Low Staffing	Red Flags			Low Staffing	Red Flags			Low Staffing	Red Flags			Low Staffing	Red Flags			Low Staffing	Red Flags	Low Staffing	Red Flags	Low Staffing	Red Flags		

## Supervisor Impact

Ward Sister Shifts Unfilled			Ward Sister Shifts Filled			Ward Sister Shifts Unfilled			Ward Sister Shifts Filled			Ward Sister Shifts Unfilled			Ward Sister Shifts Filled			Ward Sister Shifts Unfilled			Ward Sister Shifts Filled		
464	1418	75%				338	1100	77%				373	1107	75%				422	933	69%			
Ward Sister Shifts Unfilled	Ward Sister Shifts Filled	Ward Sister % Filled				Ward Sister Shifts Unfilled	Ward Sister Shifts Filled	Ward Sister % Filled				Ward Sister Shifts Unfilled	Ward Sister Shifts Filled	Ward Sister % Filled				Ward Sister Shifts Unfilled	Ward Sister Shifts Filled	Ward Sister % Filled			

Note: The majority of cells above are colour coded as - improved **green**, regressed **red** and dark grey if no change from the previous month.





## Medicine

## Spec Serv

## Surgery

## Children's

## Women's

## Weston

## Bed Occupancy

101%

106%

This  
MonthLast  
Month

96%

92%

This  
MonthLast  
Month

103%

106%

This  
MonthLast  
Month

76%

83%

This  
MonthLast  
Month

Bed occupancy for maternity service is not relevant due to women occupying the same bed over the course of the day. Live births delivered is a more reliable indicator of activity.

99%

98%

This  
MonthLast  
Month

## Hospital Acquired Infections

0

2

1

MRSA

MSSA

C Diff

0

0

0

MRSA

MSSA

C Diff

0

0

0

MRSA

MSSA

C Diff

0

0

2

MRSA

MSSA

C Diff

0

0

0

MRSA

MSSA

C Diff

0

2

1

MRSA

MSSA

C Diff

## Falls

Ward

40

1

ED

4

0

Falls

With Harm

25

2

Falls

With Harm

21

0

Falls

With Harm

0

0

Falls

With Harm

0

0

Falls

With Harm

Ward

44

1

ED Weston

1

0

Falls

With Harm

## Hospital Acquired Pressure Ulcers

1

0

PU Grade 2

PU Grade 3/4

0

0

PU Grade 2

PU Grade 3/4

1

0

PU Grade 2

PU Grade 3/4

0

0

PU Grade 2

PU Grade 3/4

0

1

PU Grade 2

PU Grade 3/4

1

0

PU Grade 2

PU Grade 3/4



## Divisional Key Factors

### Medicine

#### Key Factors:

Eight lower staffing reports were recorded due to staff being moved to support escalation areas or cover Enhanced Care Observation demand. None were reported as red flags incidents.

#### Top 3 nursing hotspots for sickness:

A528 10.1%

A518 small team - 9.3% some LTS being managed

A900 8.3% short term sickness due to flu and GI upset

#### Top 3 nursing hotspots for vacancies:

No Band 5 vacancy across division, there are some HCSW vacancies but no hotspots

### Surgery

#### Key Factors:

the two red flag incidents reported for Surgery have both been reviewed by the divisional governance process and neither meet the criteria for a red flag incident.

#### Top 3 nursing hotspots for sickness:

A800, A609, A414 Endoscopy - cough, cold, flu and post surgery themes.

#### Top 3 nursing hotspots for vacancies:

All theatres across the division, A700 and WGH ITU.

### Specialised Services

#### Key Factors:

Sickness this month noted to be above average with flu and Covid being a significant factor.

#### Top 3 nursing hotspots for sickness:

TYA, C805 and C705 driven as above, all being managed within policy.

#### Top 3 nursing hotspots for vacancies:

None



## Divisional Key Factors cont.

### Children's'

#### Key Factors:

Lower than expected acuity and dependency towards the end of December - this meant that not all vacant shifts required escalation. Some newly qualified nurses have remained in unregistered posts due to awaiting pins.

Some additional 1:1 staff required for enhanced observation for CAMHS patients across several wards.

#### Top 3 nursing hotspots for sickness:

Starlight, Caterpillar and Lighthouse - top 3 % of sickness. Mostly short term. All escalated appropriately.

#### Top 3 nursing hotspots for vacancies:

Children's ED = 13.37% (1.39 WTE).

Dolphin = 9.58 % (3.51 WTE).

Bluebell/Sunflower = 7.21% (2.92 WTE)

Targeted recruitment into vacancies with some new starters joining Jan/Feb 2025. Staff moved from other ward areas to support where required and maintain safety.

### Women's

#### Key Factors:

Staffing numbers on NICU have improved over all but the ratio of QIS staff (according to acuity) remains a challenge. A3 Thinking Project in progress.

Ward 73 has highest vacancy rate for MSWs - Action plan in place.

#### Top 3 nursing hotspots for sickness:

Community Midwifery Ward 76 Ward 78

#### Top 3 nursing hotspots for vacancies:

Ward 73 MSWs (MAs)

### Weston

#### Key Factors:

3 Red flag incidents removed due to being incorrectly reported. The three incidents on Knightstone were all HCSW gaps when non-elective patients are on ward. Plan to ensure shifts are put to bank early to increase the chance of filling.

Berrow (3 incidents) Incidents are due to increased acuity and number of level 2 patients so the ward requires staffing above establishment. Early and priority escalation of shifts to ensure patient safety

Hutton (4 incidents) Incidents are due to ECO gaps. Plan to review and risk assess to consider if co-horting can reduce staffing demand

AMU (3 incidents) Gaps created due to short term sickness, unable to fill despite escalation at earliest opportunity

Steephholm (3 incidents) Incidents due to ECO and HCSW gaps. Daily review of ECO patients and look at safe ways of working to manage these patients.

#### Top 3 nursing hotspots for sickness:

Waterside 13.9%- 3 LTS, multiple Short term sickness- cough, cold, flu

Steephholm 13% - 3 LTS, multiple Short term sickness- cough, cold, flu

Knightstone 11.5%- 1 LTS, multiple short term sickness- cough, cold, flu (Small team)

#### Top 3 nursing hotspots for vacancies:

ED 4wte RN (staff being redeployed) and Site-Wide HCSW vacancies.