

Fill rate indicator return																		
Staffing: Nursing, midwifery and care staff																		
http://www.buckshealthcare.nhs.uk/About/safe-staffing.htm																		
Hospital Site code	Hospital Site name	Ward name	Main 2 Specialities on each ward		Day		Day		Night		Night		Day		Night		Rationale / Notes from Matron	
			Specialty 1	Specialty 2	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)		
RXQ51	Amersham Hospital	RXQ-AH CHA Ward	Chartridge	314 - REHABILITATION		1395	1245	1740	1290	620	550	620	550	89.2%	74.1%	88.7%	88.7%	For registered nursing the high numbers are due to the number of newly qualified and international nurses we have recently employed on all 3 ward areas. Some are still awaiting NMC PIN numbers. We currently have across the Amersham site 12 newly qualified staff: 4 UK trained and 8 international. We regularly move staff around the site to ensure safety for both the staff and the patients. Waterside currently has 6 of these newly qualified staff and in the new year when they have all had more than 3 months in post I will start to move them onto different wards to ensure they are all supported and have appropriate supervision. A Practice educator has been assigned to help with those who are struggling to complete the medicines competency assessment- this can be quite an issue on very busy heavy wards. We are carrying a number of vacancies for Unqualified staff on all 3 ward areas and have 3 UQ currently on Long term sickness, however we do review acuity levels on a daily basis and move staff around to ensure the staffing is appropriate. If we have a high number of trained staff who do not currently hold their NMC pin number they would be counted in the UQ numbers to ensure we are safely staffed. We have had difficulty covering all the UQ shifts through Bank partners and have had to go to High cost agency without success, however we have covered across the site to ensure we are safe where possible. Matron has worked on the ward when staffing has been below minimal. Ward manager and all staff have stayed on shift to ensure patients are managed safely and late admissions are admitted and care plans are in place.
RXQ51		RXQ-AH HEB	BNRU	314 - REHABILITATION		1162.5	1110	1567.5	1350	620	580	620	560	95.5%	86.1%	93.5%	90.3%	
RXQ51		RXQ-AH WSC Unit	Waterside	314 - REHABILITATION		1395	1417.5	2205	1530	620	580	620	570	101.6%	69.4%	93.5%	91.9%	
RXQ61	Buckingham Hospital	RXQ-BCH Ward	Buckingham	314 - REHABILITATION		930	877.5	465	885	620	580	310	380	94.4%	190.3%	93.5%	122.6%	As a result of the last acuity dependency review, and an increase in the dependency and complexity of patients we have agreement to increase our staffing at Buckingham community Hospital. The amount of double handed, and complex patients on the ward has also meant an increase in staffing on the all shifts most days.
RXQFN	Florence Nightingale Hospice	RXQ-FNH Ward	Florence Nightingale	315 - PALLIATIVE MEDICINE		1252.5	1200	757.5	795	620	660	310	270	95.8%	105.0%	106.5%	87.1%	We are trying to have 3 RN on an early and 2 RN on a late. Our safe staffing minimum is 2 RN on each shift however with the complex medication regimes, Dr ward rounds and MDT meetings we prefer to roster 3 RN on an early. There are also times we can only get a bank RN we have just recruited 3 further HCA bank nurse
RXQ65	Marlow Hospital	RXQ-MH Ward	Marlow	314 - REHABILITATION		930	922.5	232.5	540	620	630	290	290	99.2%	232.3%	101.6%	100.0%	There has been an increased use of HCA on all shifts necessary due to patient acuity. Staffing levels reduced recently but are currently being revised.
RXQ02	Stoke Mandeville Hospital	RXQ-SM BURNS UNIT	Burns unit	160 - PLASTIC SURGERY		816.5	667	253	264.5	356.5	333.5	356.5	333.5	81.7%	104.5%	93.5%	93.5%	
RXQ02		RXQ-SM ITU	SMH ICU	192 - CRITICAL CARE MEDICINE		5115	5355	465	795	3410	3290	310	280	104.7%	171.0%	96.5%	90.3%	SMH ICU :The number of HCA's we currently have in our establishment means that on the days when we need to have 2 HCA's on a shift (Tuesday and Friday to help support with stock arrival, rotation of stock and ensuring storerooms) we don't then have an HCA on a night shift. As we seem to be quite often having level 2 patients in side rooms we may have 2 HCA's on a day shift rather than needing to look to increase our qualified amount of nurses on for that shift. This means we will have a higher than established number of HCA's on a day shift (2 most days) and less than our establishment on for the night shifts.)
RXQ02		RXQ-SM NNU	Neonatal intensive care	192 - CRITICAL CARE MEDICINE		2790	3067.5	930	315	1860	1950	620	360	109.9%	33.9%	104.8%	58.1%	NNU, SMH: We currently have 0.67 WTE Nursery Nurse vacancy which as been filled with a start date of Jan. 2015. If we are unable to fill the shifts with 2 nursery nurses then band 5 staff nurses are used to fill the gap. We continue to have a vacancy at Band 5&6 of 4 wte. During December we had 4.1 nurses on long term sickness. The unit was safe during December despite having a high number of HDU and ITU infants. The Neonatal network now recognises the very high case mix and will reflect this in discussions with commissioners through business planning next year. In the meantime, any concerns regarding staffing were escalated appropriately and action taken by using cover from the PDN, Senior Nurse, bank, agency, ETB, OT and help from ward 3.
RXQ02		RXQ-SM ROTHS	Rothschild	501 - OBSTETRICS		3022.5	3022.5	930	930	1550	1550	620	620	100.0%	100.0%	100.0%	100.0%	
RXQ02		RXQ-SM STA	St Andrew & St. Patrick	400 - NEUROLOGY		3921.5	3392.5	1426	1748	3208.5	2978.5	1426	1621.5	86.5%	122.6%	92.8%	113.7%	NSIC : The existing staff from overseas are beginning to get their PIN numbers (xx remain outstanding). Until PIN numbers are issued by the NMC these staff have worked and been paid as HCA's. This is shown on the increased numbers for HCA's. All vacant posts have now been filled, however, post holders will be taking up these positions through January and February. This includes another 14 nurses from overseas. Trained nurse numbers, although declared as safe have been below the planned staffing figures. This has been due to; • High Long Term sickness on all wards. • Poor pick up of temporary staffing including High cost Agency
RXQ02		RXQ-SM STD	St David	400 - NEUROLOGY		1426	1357	1069.5	1173	1069.5	805	713	851	95.2%	109.7%	75.3%	119.4%	There are currently 17.5 WTE trained nurse vacancies. 5 overseas RN's are awaiting PIN's from the last overseas intake in October.
RXQ02		RXQ-SM STG	St George	400 - NEUROLOGY		1426	1357	1069.5	1184.5	1069.5	828	713	782	95.2%	110.8%	77.4%	109.7%	
RXQ02		RXQ-SM STF	St Francis	400 - NEUROLOGY		517.5	448.5	46	46	414	379.5	46	46	86.7%	100.0%	91.7%	100.0%	St. Francis has been gradually increasing capacity since the refurbishment but has not yet typically exceeded 60% full occupancy. Consequently, staffing levels have been adjusted commensurately with demand. At no time was the ward unsafe. Staff are moved dynamically between Ward 3 & St. Francis to manage demand safely.
RXQ02		RXQ-SM STJ	St Joseph	400 - NEUROLOGY		759	701.5	506	425.5	506	471.5	253	207	92.4%	84.1%	93.2%	81.8%	
RXQ02	RXQ-SM W1	Wards 1 & 2	110 - TRAUMA & ORTHOPAEDICS		3022.5	2970	2092.5	1987.5	1550	1610	930	1370	98.3%	95.0%	103.9%	147.3%	Wards 1 and 2 have a very complex difficult patient who requires overnight specialising. They often use a RMN who will come into the trained numbers if they can't get an additional HCA.	
RXQ02	RXQ-SM W 3	Ward 3	420 - PAEDIATRICS		2495.5	2392	34.5	34.5	2495.5	2415	34.5	34.5	95.9%	100.0%	96.8%	100.0%		
RXQ02	RXQ-SM W 4	Ward 4	301 - GASTROENTEROLOGY	340 - RESPIRATORY MEDICINE		1860	1875	930	930	620	680	620	590	100.8%	100.0%	109.7%	95.2%	

RXQ02	Stoke Mandeville Hosp	RXQ-SM W 5	Ward 5	303 - CLINICAL HAEMATOLOGY	340 - RESPIRATORY MEDICINE	1782.5	1449	356.5	667	1069.5	885.5	356.5	598	81.3%	187.1%	82.8%	167.7%	Ward 5: Following the establishment review in January 2014 we have been actively recruiting to our qualified nurse posts to meet the new qualified nurse ratio. We are now fully established for our HCA posts. In December there were high levels of sickness and RN vacancies. Increased numbers of HCA's ensure adequate numbers of staff. Staffing is declared as safe, although below planned numbers. We continue to recruit to our qualified nurse posts currently have 3.5 WTE vacancies. Once these staff are settled into post we hope to be able to roster 3 qualified nurses onto nights regularly. Until that point it will be showing that we are using more HCAs on nights and are low on trained on nights.
RXQ02		RXQ-SM W 6	Ward 6	340 - RESPIRATORY MEDICINE		1782.5	1633	1069.5	816.5	1426	1322.5	713	644	91.6%	76.3%	92.7%	90.3%	Ward 6 have at times been low on numbers due to vacancies, mat leave and no bank fill. They have however had 4 trained on nights.
RXQ02		RXQ-SM W 7	Ward 7	430 - GERIATRIC MEDICINE	302 - ENDOCRINOLOGY	1740	1635	585	997.5	930	670	310	600	94.0%	170.5%	72.0%	193.5%	Ward 7 is 3 wte RNs short of full complement. Internal redeployment on a day to day basis has assured that the ward remains safe. The Ward has needed to care for at risk, vulnerable patients requiring 'specialising' every day, every shift throughout December thus indicating the large over fill rate for HCAs.
RXQ02		RXQ-SM W 8	Ward 8	430 - GERIATRIC MEDICINE		2325	2122.5	930	855	930	890	620	690	91.3%	91.9%	95.7%	111.3%	Four unfunded escalation beds for 1 year. Frequent requirement to special at least one patient, 24/7.
RXQ02		RXQ-SM W9	Ward 9	430 - GERIATRIC MEDICINE		1860	1567.5	930	892.5	930	720	620	670	84.3%	96.0%	77.4%	108.1%	Ward 9 have also been low at times due to vacancies and bank fill. They have run on 2 trained and 3 HCAs or 3 trained and 2 HCAs
RXQ02		RXQ-SM W 10	Ward 10	300 - GENERAL MEDICINE		2325	2137.5	930	930	1120	1200	620	610	91.9%	100.0%	107.1%	98.4%	
RXQ02		RXQ-SM W 16a	Ward 16A	100 - GENERAL SURGERY		4065	3945	2325	2175	1860	1880	1240	1260	97.0%	93.5%	101.1%	101.6%	
RXQ02		RXQ-SM W 16b	Ward 16B	502 - GYNAECOLOGY	130 - OPHTHALMOLOGY	3720	3030	2265	2265	1860	1800	1240	1260	81.5%	100.0%	96.8%	101.6%	
RXQ62	Thame Hospital	RXQ-THC Ward	Thame	314 - REHABILITATION		930	967.5	232.5	540	620	630	150	150	104.0%	232.3%	101.6%	100.0%	As a result of the last acuity dependency review, and an increase in the dependency and complexity of patients we have agreement to increase our staffing at Thame community Hospital to 2+1 on a late shift. The amount of double handed, and complex patients on the ward has also meant an increase in staffing on the early shift to 2+2 on most days. It is also becoming increasingly difficult for bank partners to fill these shifts and therefore bank staff nurses are being requested.
RXQ50	Wycombe Hospital	RXQ-WH CCU2A	CCU Ward 2A	320 - CARDIOLOGY		2325	2122.5	930	802.5	1240	1160	310	320	91.3%	86.3%	93.5%	103.2%	The under fill is due to no bank or agency taken by external bookings at this time. Matron continues to redistribute staff between wards on a shift by shift basis in order to ensure that Ward 2A remains safe.
RXQ50		RXQ-WH ITU	WH ICU	192 - CRITICAL CARE MEDICINE		3255	2580	465	600	2170	1710	310	120	79.3%	129.0%	78.8%	38.7%	WH ICU has 8 wte qualified vacancies and 2 wte unqualified (HCA) vacancies. The unit was not full throughout the month. I would emphasise that we flex up and down according to demand and pt acuity and share staff with our Sister unit at Stoke. The role of HCAs in Critical care is supportive - filling supplies, maintaining stock levels, tidying and assisting RNs. Only RNs deliver direct patient care. At no time was patient care compromised.
RXQ50		RXQ-WH W5B	Ward 5B	430 - GERIATRIC MEDICINE		930	1297.5	930	915	620	640	620	640	139.5%	98.4%	103.2%	103.2%	5B will be overfilling as we are running with 3+2 during the day times rather than 2+2 due to clinical risks and 2+2 rather than 2+1 at night as approved by the Chief Nurse & Associate Chief Nurse.
RXQ50		RXQ-WH W8	Ward 8	300 - GENERAL MEDICINE		4305	4057.5	1537.5	1882.5	1550	1850	620	600	94.3%	122.4%	119.4%	96.8%	There has been a need for HCA specials required to manage patients at high falls risk on HASU. Since October 1st one more bed has been opened so the unit now runs 9 funded beds. Establishments will be adjusted in due course.
RXQ50		RXQ-WH W12A	Ward 12A	100 - GENERAL SURGERY		765	862.5	585	697.5	390	390	240	230	112.7%	119.2%	100.0%	95.8%	Elective activity remains below expected and funded beds so there has been a reduction in the minimal agreed staffing levels needed to ensure safe staffing. Waiting list initiatives are still being carried out on 12B at weekends changing staffing requirements
RXQ50		RXQ-WH W12B	Ward 12B	110 - TRAUMA & ORTHOPAEDICS		1732.5	1155	1095	1140	620	630	620	550	66.7%	104.1%	101.6%	88.7%	Over the two week Christmas period 12A and 12C combined into a single ward. 12A closed and 12C increased in bed base by 5 beds to accommodate additional Day Surgery Patients and 12A inpatient. Minimum staff numbers were increased to meet the additional demand.
RXQ50		RXQ-WH W12C	Ward 12C	101 - UROLOGY		1455	1335	1162.5	945	620	600	440	330	91.8%	81.3%	96.8%	75.0%	
														94.6%	114.0%	95.1%	101.9%	Overall the trust is compliant with TDA Safe staffing rules