

Appendix One

STAFFING ESCALATION TIMELINE

Date	Communication	
2008	Staffing levels were first placed on the directorate risk register in 2008 and have been reviewed at subsequent directorate governance forums.	
08.02.11	CQC visit at Lincoln identified that the current establishment did not meet the RCN recommendations.	
Jan 2013	Staffing levels at Lincoln were raised urgently with the Deputy Director of Operations at Lincoln. There had been some specific challenging issues around vacancies, maternity leave and sickness levels. The service was able to increase temporarily the hours of some part time staff to help fill some of the maternity leave.	
Dec 2013	A paper was requested by the Director of Nursing and presented to the Children and Young Person’s Board. It was requested that some further work was done around monitoring acuity and activity which was completed.	
April 2014	The Director of Operations requested a paper to take to the Trust Development Authority (TDA) identifying the key risks within paediatrics and the nurse to patient ratios where included. As a result of this paper, the Senior Business Manager was asked to write a further paper on the key risks to be presented to the Trust Executive. An acuity and activity monitoring tool was put in place.	
July 2014	The CQC visited the service and identified that the service did not meet the RCN standards in regards to registered nurse staffing.	
Aug 2014	As part of the Chief Nurse’s safer staffing review, evidence was submitted relating to the non-compliance against agreed nurse ratios within the Registered Children’s nurse workforce.	
Oct 2014	Agreement to close 10 beds (5 at Lincoln and 5 at Boston) in order to improve staff to patient ratios.	
Dec 2014	An increase of 10 WTE B5 staff was agreed by the Trust Board	
04.09.15	Meeting with DON re using staffing vacancies to recruit unregistered staff to enable RNs to focus on nursing duties.	
Nov 2015	Confirm and challenge with Deputy DoN . Agreed new staffing template. Situation with vacancies remain the same but further issues caused by maternity leave and sickness. This has led to an implementation at Lincoln of a winter plan which advocated reducing elective activity, partial closure of Safari Ward in the mornings (losing 4 beds for this period each day), staffing Clinic 5 with HCSW staff only, moving staff from Grantham and utilising community services more effectively and to help with cover (ULHT employed). Recruitment has also taken place for additional band 4 nursery nurse staff (5 WTE).	



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Date	Communication	
	RISK SUMMIT HELD.	
Dec 2015	Review of staffing with vacancies plus long term sickness and maternity leave shows 41% RN staff unavailable for rota. This was escalated to HON and then to DON.	
04.01.16	<p>Matron & HoN sent paper to DoN & Chief Operating Officer - Risk Summit re: Maintaining Registered Nurse Staffing Levels on Acute Paediatric Wards.</p> <ul style="list-style-type: none"> • Currently 41% (23.5 WTE) of the funded registered workforce is not available for rostered shifts due to vacancy factor, long term sickness and maternity leave. • Current ward template does not take into account the Royal College of Nursing's standards on paediatric nurse ratios. Thus many shifts do not reflect accepted nurse to patient safety standards when assessed against acuity. • Benchmarking against local district general hospitals indicates that staffing levels are significantly lower than our local comparators. • Papers have previously been presented raising concerns in December 2013 and April 2014. A briefing paper recommending uplift in RN staffing was then presented in August 2014. • In October 2014 10 beds were close across the service and further investment of an uplift of 10 WTE Band 5 posts was agreed in December 2014. • Recruitment during 2015 has been immensely challenging and we have been unable to recruit into the vacancies within the registered workforce. • Current RN vacancies combined with long term sickness and maternity leave means that the position in January 2016 is that there are 23.5 WTE RN staff unavailable for roster. This means that on a daily basis, it is not possible to staff all areas at the current agreed template. This agreed template does not allow us to meet the RCN Standards on most shifts. • A winter plan was put in place to help manage this position and has made some minimal impact. 	
04.04.16	<p>Medical Director & Chief Operating Officer sent report written by Senior Business Manager & Clinical Director on PHB Paediatric Middle Grade Rota and associated actions / risks to Trust Board.</p> <p>The purpose of this report is to provide the Trust Board with an update regarding the risks associated with the staffing of the PHB middle grade rota, current risk mitigation and options for the future acute paediatric service on the PHB site</p>	
April 2016	PHB Paed Service contacted W&C CD to inform that they may have over-recruited to the middle grade rota. No further escalation of medical staff risks from PHB site.	
May 2016	Nurse Staffing Risk reviewed. In same position until RN vacancies are filled.	
13.07.16	The Acute Paediatric Service at PHB escalated a severe medical middle grade staffing risk on 13 July 16 to the W&C Clinical Director.	








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Date	Communication	
	<p>The service could not provide assurance to the triumvirate that all medical clinical shifts could be covered for August 16.</p> <p>INTERNAL RISK SUMMIT with PHB Consultants, W&CCD & HOM/N</p>	
14.07.16	W&C Triumvirate meeting; Request to M Brassington for Exec Risk Summit	
20.07.16	RISK SUMMIT	
20.07.16	Meeting with PHB consultants, CD & SBM held.	
25.07.16	RISK SUMMIT	
29.07.16	<p>Ward Sister & HoN sent paper to DoN reporting an inability to maintain safe RNC staffing levels on the Children's Ward, PHB.</p> <p>Issue: RN staffing vacancies on Ward 4A are currently running at 8.97 wte but when added to maternity leave and long term sick, 14.85 wte are unavailable for roster - this equates to 51%.</p> <p>This makes the rota exceedingly challenging to populate with the safe and appropriate skill mix of clinical staff.</p> <p>Report Recommendations:</p> <ul style="list-style-type: none"> • To secure approval to uplift the non-registered establishments in order to release registered nurse staffing to carry out the RN role over the next six to twelve months. • Flex the bed capacity so as to ensure a safe staffing ratio within the paediatric ward at PHB. • Enhanced support from Site Duty Managers. • Communication strategy so as to ensure all staff fully aware. 	
02.08.16	<p>Significant issues at Pilgrim that were taken to Risk Summit in July 2016 and followed up by a paper to Executive Team on 2 August 2016. Therefore risk remains the same.</p>	
01.11.16	<p>Briefing paper presented at Trust Board This report provided an update to the Trust Board, following the recent papers which discussed imminent risks to staffing within Paediatric middle grades and the risk to maintaining a safe registered sick children nurse (RSCN) staffing levels on the Children's wards at Pilgrim Hospital, Boston. There has been significant short term recruitment to the middle grade posts but minimal RSCN recruitment; however the service is far from stable with additional staff turnover and shortages in general.</p> <p>The paper included current risk mitigation and options for future planning.</p>	
05.12.16	RISK SUMMIT	
05.05.17	See e-mail from Paul to LHAC re Paediatrics and history	






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Date	Communication	
	 RE Paediatrics.msg	
05.05.17	Email sent to Band 7 CCS Team Leaders	
12.07.17	Matron sent email escalating concerns re: expected staffing levels on Childrens wards from September 2017. <u>Rainforest Ward</u> Current vacancy = 5.29wte September Vacancy = 8.92wte Requesting agreed plan as matter of urgency. <u>Children's Ward 4A</u> Current vacancy = 7.13wte September vacancy = 9.41wte	HoN, CD, HoS, GM Risk Manager, Business Manager
14.07.17	Email escalating concerns re: staffing levels on Childrens wards Briefing paper sent	HoN, CD, HoS, GM Risk Manager, Business Manager
18.07.17	July 2017 Staffing Report Update sent	HoN
20.07.17	Amended July 2017 Staffing Report Update sent	HoN
14.08.17	Emailed Staffing Shortage briefing paper & draft QIA to Deputy Director of Nursing Penny Snowden & Julie Pipes Assistant Director of Strategy at request of HoN	Deputy Director of Nursing. Assistant Director Strategy.
15.08.17	Emailed draft QIA :Temporary closure of the generic community children's nursing service at Boston to support safe staffing levels on children's ward 4A. AIA	HoN
15.08.17	July 2017 Staffing report update sent. Reformatted and narrative added by DDN to take comments from ET on 17.08.2017 so ready for TB. DDN requested final QIA to go to NHSi by end of 17.08.2017.	HoN
15.08.17	E-mail trail – MD e-mailed CD and HOM/N stating need a risk summit with CCGs to go through issues.	
17.08.17	RISK SUMMIT	
22.08.17	Emailed draft QIA Reduction in Beds  QIA Reduction Beds Report Au...	HoN, CD, HoS, Deputy Director of Nursing, Business Manager
23.08.17	Emailed QIA Reduction in beds Childrens wards	HoN, CD, HoS, Deputy Director of Nursing,







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Date	Communication	Business Manager
		Business Manager
24.08.17	E-mail from CD to Paediatricians and subsequent responses.  RE: Paediatric Nursing Issues	
29.08.17	Response from NHSi forwarded by DON (from 21.08.2017)  FW Paeds documents.msg	
30.08.17	Email to DoN answering queries on QIA closure CCN Teams & QIA Reduction in beds Children's wards  Updated QIAs.msg	DoN
05.09.17	CD went to TB when nursing issues were discussed along with the paper written that went to TB week before. Board has unanimously agree to support short term measures and to seek systems views in the escalation mtg tomorrow for medium and long term approach.	
06.09.17	PAEDIATRIC RISK SUMMIT	
18.09.17	E-mail Paediatric Continuity – SB stated that she thought an external nursing review would be very beneficial with ref to STP work and in relation to options and workforce reqs.   RE Paediatric Business Continuity.n.issue - following dw e FW ULHT Paeds	
09.10.17	September Staffing Report Update sent	HoN
12.10.17	Establishment reviews with DCN & e-Rostering	
06.11.17	October 2017 Staffing report update sent	HoN, GM, CD
07.11.17	October 2017 Staffing report update sent	DoN in absence of HoN
04.12.17	RISK SUMMIT 04.12.2017 Email received from Penny Snowden Deputy Director of Nursing following her attendance at Risk Summit on behalf of Michelle Rhodes   FW Amended papers Risk Su... RE Amended papers Risk Su...	
05.12.17	Email from Matron to Bank Business Manager, HOM/N, Deputy DON & DON Re: Paediatric Agency Staffing – requesting to put back into Rainforest staffing due to difficulties covering sickness & x3 nurses on a shift is not enough.	









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Date	Communication	
	<p>Advised staff reporting poor experience due to turnaround & volume rather than acuity. Ie) 15 admissions and 12 discharges simultaneously – pressure on staff. Concerns reported re: winter & potential increase in babies admitted which requires higher staff ratio. Reported challenging shifts for staff. Reports concerns recently have not been able to always get cover when needed and we now have a number of new staff.</p>	
12.12.17	November 2017 Staffing report update` 12.3217	HoN
15.12.17	<p>12.12.2017 – E-mail re prep for Risk Summit on 15.12.2017 + e-mail from 14.12.2017</p> <p> </p> <p>Draft risk paper for meeting on Wed - ple paediatric risk summit paper to support paediatric risk summit</p>	
29.12.17	<p>E-mail from GM for Risk Mtg</p> <p></p> <p>RE paper to support paediatric risk summit</p>	
12.01.18	<p>HOM/N e-mailed DON to discuss/update her re discussion with DCN re templates and the review of establishments above.</p> <p></p> <p>childrens fill rates.msg</p>	
18.01.18	<p>Paediatric Discussion Based Exercise – Exercise PITSTOP 1000hrs-1400hrs</p> <p><i>Women & Children's Paediatric speciality is experiencing staffing shortages at all levels. In order to mitigate a critical staffing shortage within the Paediatric inpatient setting at Pilgrim Hospital, a contingency plan has been proposed. This will re-locate Pilgrim Paediatric inpatient services to Lincoln Hospital Rainforest and Lancaster Wards and will provide sufficient beds and resources for inpatients, day case and Paediatric Assessment Activity.</i></p>	Led by Business Manager
18.01.18	December 2017 Staffing report update sent	HoN
06.02. 18	<p>January 2018 Staffing update report sent</p> <p></p> <p>Staffing Report January 2018.msg</p>	HoN
06.02.18	Meeting held to discuss fill rates and staffing template with Deputy Director of Nursing Workforce: HOM/N & Matron. Nettleham Ward Annexe	HoN & Deputy Director Nursing - Workforce
19.02.18	E-mail from GM re regular risk summits	













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Date	Communication	
	 Regular Paediatric Risk Summit Meetings.r	
20.02.18	<p>E-mail from HOM/N to escalate concerns regarding nurse staffing on 4a and advising of a reduction to 12 beds, and acknowledged by DON (12.45h).</p> <p>Daily Paediatric shift fill rates reviewed by HoN, Matron and Ward Sister for 4A.</p> <p>Concerns raised as to compliance against fill rates - This concern has been escalated via the risk summits and staffing papers.</p> <p>Proposal with immediate effect due safety & quality concerns to reduce bed capacity to 12 for the next 6 months, this will give us a ratio of 1RN to 4 children / bed which is the national staffing recommendations for a child of 2 and above. Within this proposal it does not facilitate the coordinator being able to be supervisory as recommended. The interim ward manager is continually covering the gaps within the rota.</p> <p>Further urgent risk summit request where this can be further discussed but an agreement is required now by us all.</p>  RE Daily paediatric shift fill rates.msg	COO, GM, DON, HOS
20.02.18	<p>E-mail from DON with letter from CQC re PHB A&E (17.06h)</p>  FW CQC Post inspection feedback k	
21.02.18	<p>E-mail from DON with letter from CQC re possible Section 31 action</p>  Fwd Letter for your immediate attention.r	
21.02.18	<p>E-mail from GM to PHB Surgery advising to decrease in beds to 8 and inability to take elective surgery.</p>  Confidential PHB paediatric ward limitt	
22.02.18	<p>E-mail from HOM/N supporting the e-mail from Deputy Matron outlining the requirements for children in ED.</p>  FW PHB AE.msg	
23.02.18	<p>E-mail from HOM/N outlining the requirement for Children's Nursing to support ED. Acknowledged by DON with thanks to all.</p>	












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Date	Communication	
	 <p>RE Decrease of Childrens Bed Capacit</p> <p>Decrease of Children’s Bed Capacity on Ward 4A from 19 to 8 beds / cots with immediate effect on Ward 4a at Pilgrim Hospital.</p> <p>Request to support the A&E department by facilitating 3 of our registered children’s nurses to work in the A&E at PHB.</p> <p>W&C Clinical Directorate supported these required actions so that our children can continue to be assessed in our A&E at PHB. There is no plan to implement the same measures at LCH currently. The Executive Directors and Trust Board support these actions.</p> <p>The Trust is aware of the affect this will have on activity and this is being addressed.</p>	
23.02.18	<p>E-mail from GM to Contracting re elective surgery and response indicated that CCG aware.</p>  <p>RE Paeds Surgery Pilgrim .msg</p>	
23.02.18	<p>Draft briefing paper to Execs from GM to HOM/N & HOS</p>  <p>Draft-Briefing Paper Releasing RN(Childrer</p>	
23.02.18	<p>E-mail from Pharmacy re TTOs and acknowledgement from HOM/N</p>  <p>Re 4a Discharges.msg</p>	
23.02.18	<p>E-mail from HOS to Paediatricians and Senior Nursing re pathway and a response from Paediatrician</p>  <p>RE Decrease of Childrens Bed Capacit</p>	
25.02.18	<p>E-mail thanks re support to ED</p>  <p>Paediatrics - very supportive over the v</p>	
26.02.18	<p>E-mail from Matron to Acute Paediatric Matron and ED Matron re core competency doc and HOM/N acknowledgement that this would be ratified by her, as Chair, at W&CCD Mtg on 27.02.2018 with a short review date.</p>   <p>Core Competencies RE Core - Childrens Nursing.m Competencies - Child</p>	






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Date	Communication	
26.02.18	E-mail from GM to advise that at Operational Meeting escalated re impact on Rainforest and a follow up response from HOS.  RE Children's ward Lincoln.msg	
26.02.18	HOM/N response to DCN request for evidence for CQC response  RE CQC Discussion and Section 32.msg	
26.02.18	E-mail from Matron to University re support for training  RE Action plan for Adult Nurses on 4a.r	
27.02.18	E-mail re rota provided to ED  RE staffing for AE.msg	
27.02.18	E-mail to DON with info for media  imes .msg	
27.02.18	E-mail trail re SOP for escalation when RN (paeds) not available  RE SOP for escalation when no R	
27.02.18	E-mail from HOS with attachments for discussion at W&CCD Gov Mtg  Bed capacity 4A.msg	
27.02.18	E-mail trail – Consultant Paediatrician/junior staff re issues in A&E & response from HOM/N to Paediatrician.   Fwd AE issues .msg FW AE issues .msg	
28.02.18	E-mail trail re liaison with Surgical colleagues re elective waiting list   RE Paeds.msg FW Brief Summary of Paed Surgery Meeting	
02.03.18	ULHT SOP e-mailed to DON & DCN  Childrens SOP re ED.msg	

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Date	Communication	
06.03.18	E-mail correspondence re surgical waiting list children   RE Urgent Paediatric Surgery Cases.msg RE Urgent Paediatric Surgery Cases.msg	
07.03.18	E-mail from HOM/N to Exec Team re Surgery  FW Urgent Paediatric Surgery Cases.msg	
11.03.18	Escalation by HOM/N to DON re 4a cover and response re risk summit + further correspondence with HOS.  RE 4a cover.msg	
12.03.18	ED SOP sent by Matron to Site Duty Managers PHB&LCH, plus subsequent e-mails re staffing.    ED SOP.msg Re ED SOP.msg Fwd Movement of staff on 4th Floor.ms	
12.03.18	E-mail of rota for rest of March to DON/HOM/N  ED Rota.msg	
13.03.18	E-mail from Exec Team PA re risk summit – subsequently arranged for 26.03.2018  Re PILGRIM ED RISK SUMMIT (URGENT PR)	
14.03.18	E-mail summary to Exec re CQC inspection  RE CQC A+E Pilgrim.msg	
17.03.18	E-mail trail from DON re Paediatric College Tutor escalating to EM School of Paediatrics reduction of beds to 8 and response from GM.  RE paediatric bed closures.msg	
21.03.18	Meeting with Senior Nursing Team & Consultants to discuss current situation.	
21.03.18	E-mail from DON to HOS Surgery & Anaesthetics, HOM/N & GMs	

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Date	Communication	
	 RE LSCS patient transferred over night	
21.03.18	Staff	
23.03.18	Paediatric Improvement Committee (dial in)  URGENT - ED Paediatric Improve	
26.03.18	Pilgrim ED Escalation Risk Summit  ED Escalation Summit.docx	
26.03.18	PAEDIATRIC RISK SUMMIT	
09.04.18	Preparation for Paediatric Multi-Agency Risk Summit	
10.04.18	MULTI-AGENCY PAEDIATRIC RISK SUMMIT   Paediatric Summit Paediatric Summit background WF... 1001408 v4 - Ag...	
13.04.18	Task & Finish Group (Paediatric Staffing PHB) – Skype mtg – COO, CEO, GM, HOS, Matron, ADS&P	
17.04.18	Pre-meet Task & Finish Gp (Paediatric Staffing PHB) - Skype	