

# Barnet, Enfield and Haringey

Mental Health NHS Trust

*A University Teaching Trust*

<b>Title:</b>	Safe Staffing Levels
<b>Report to:</b>	Trust Board
<b>Date:</b>	27 March 2017
<b>Security Classification:</b>	Public Board Meeting
<b>Purpose of Report:</b>	
<p>This report provides an overview of nurse staffing for the Trust's inpatient wards for January 2017 to February 2017 across all Boroughs/Specialist Services.</p> <p>The data demonstrates both the planned level of staff and the actual level achieved. Borough teams continue to flex their approach in respects to staffing across wards and the use of temporary staff to support acuity/dependency and special observations has ensured that staffing levels have remained safe throughout the reporting period.</p> <p>A range of quality, safety and patient experience indicators are included alongside the safe staffing data to give assurance of staffing impact against patient safety and experience indicators.</p> <p>In addition, the report outlines key actions being taken to support staff and ensure safety across inpatient wards.</p>	
<b>Recommendations:</b>	
<p>The Trust Board is asked to note this nurse staffing report and the actions being taken to ensure all inpatient wards are safely staffed.</p>	
<b>Report Sponsor:</b>	Mary Sexton, Executive Director of Nursing, Quality and Governance
<b>Comments / views of the Report Sponsor:</b>	<p>Vacancy levels remain variable across all wards even with the recent initiatives in respects to recruitment; there has been some improvement in substantive staffing levels I remain concerned regarding substantive vacancy levels.</p> <p>Recruitment and retention of skilled staff is essential and a robust whole system approach is required.</p> <p>Further assurance is required with respect to recruitment activity and outcomes regarding the Trust's active recruitment into vacancies to continue the momentum and address innovatively long standing vacancies in hard to fill areas.</p> <p>Overall, the wards have met their planned number of hours worked for registered and care support staff; they continue to address the challenge of securing staff at times with the use of temporary staff, at times of an opposite grade.</p>

	<p>Agency spend continues to be addressed and only named agency's that have been approved are utilised. A mandate has been given to reduce agency staff this financial year. To address this new Bank has been established to ensure that we are able to address short term staffing issues and an investment in the training of bank staff to address the quality of temporary staff with compliance in mandatory training.</p> <p>Sickness continues to require robust management to ensure a consistent workforce to meet all quality and patient experience indicators. Occupational Health support actively being sought by managers in respect of staff sickness.</p>
<b>Report Authors:</b>	<p>Name: Mary Sexton  Title: Executive Director of Nursing, Quality and Governance  Tel Number: 020 8702 3032  E-mail: <a href="mailto:mary.sexton2@beh-mht.nhs.uk">mary.sexton2@beh-mht.nhs.uk</a></p> <p>Name: Ben Opoku  Title: Non-Medical Education Lead  Tel Number: 020 8702 5963  E-mail: <a href="mailto:bernard.opoku@beh-mht.nhs.uk">bernard.opoku@beh-mht.nhs.uk</a></p>
<b>Report History:</b>	Regular Report.
<b>Budgetary, Financial / Resource Implications:</b>	<p>Numerous financial implications associated with safe staffing including;</p> <ul style="list-style-type: none"> <li>- costs associated with purchasing of electronic IT solution to record and track staff usage</li> <li>- costs associated with use of temporary staffing or savings from reduced usage</li> <li>- costs associated with use of agency staff or savings from reduced usage</li> </ul>
<b>Equality and Diversity Implications:</b>	The planning of staff is taken into account across all Trust services and is compliant within our Equality and Diversity duty.
<b>Links to the Trust's Objectives, Board Assurance Framework and / or Corporate Risk Register</b>	Links to all Trust objectives and regulatory standards
<b>List of Appendices:</b>	<ul style="list-style-type: none"> <li>• Appendix 1 and 2 – Barnet, Enfield, Haringey and Specialist Service Indicator Data Sets</li> </ul>

## Report

### 1. Introduction and Background

- 1.1 This report provides the Trust position in relation to safe staffing indicators for all of the Trust's inpatient wards.
- 1.2 This work has included the daily monitoring and robust management of planned and actual staffing of both registered and unregistered staff across all in-patient areas. The analysis allows for the emerging challenges to be addressed in a timely manner to ensure the delivery of planned staffing levels, to support the provision of safe and high quality care to service users and improved patient experience.
- 1.3 It is acknowledged that staffing indicators and fill rate analysis alone do not give adequate assurance of patient safety, high quality care and positive patient experience. It is the triangulation of key patient safety, quality and experience measures, alongside staffing data that informs the Board that staffing data is being considered, measured and analysed in relation to key patient safety, quality and experience indicators. Borough service lines continue to identify areas of concern, which are addressed in robust ways to enable clinicians and service management teams to have greater integrated intelligence to drive improvements in patient care.
- 1.4 It is acknowledged that this triangulated and integrated intelligence alone cannot provide definitive indicators, but it can give a steer and indication on possible areas of risk and allows wards and teams to share best practice in respects to how they may have achieved more positive outcomes.
- 1.5 The key indicators currently being measured alongside staffing fill rates are:
  - Patient Experience : Family and Friend Test ( FFT) and Patient Experience Survey
  - Complaints and Concerns of Service Users: formal and informal complaints
  - Clinical incidents: Overall Datix Incidents, Moderate Incidents and Serious Incidents
  - Overall vacancy rates of each ward
  - Overall sickness rates of each ward

### 2. Indicators

- 2.1 Patient Experience: The Trust continues to carry out local real time patient experience feedback, using an online survey system. Data is collected using various methods which include electronic tablets and paper surveys. The frequency of service user surveys varies across wards and teams, and is dependent upon the speciality of the ward/department and the length of stay of the service user group, and can vary from weekly to three monthly. In addition, the Family and Friends Test (FFT) give an indication of service user experience.
- 2.2 Complaints and Concerns: Complaints of both a formal and informal nature give an indication of patient satisfaction, and continue to be both monitored and reported through local governance structures and Trust wide Deep Dive meetings. All formal complaints are evidenced using actions plans to ensure that lessons learnt can be tracked and appropriate assurance given that areas of concern have been addressed. It is recognised that we need to capture, replicate and celebrate with staff the positive comments and compliments. The patient experience team is now providing details of open text comments received via The Patient Experience Survey as well as compliments data at the Deep Dive Meetings.
- 2.3 Clinical Incidents: It is acknowledged that improved reporting of incidents is viewed as positive. It is understood that a richness of data/intelligence in respect of incidents, trends and patterns allows organisations to develop approaches to address emerging themes ensuring that we respond in a timely manner. This learning from incidents assists in the development of improved services specifically informed by patient information with an

aspiration to ensure there is co-design and development of services with patients, including internal and external user and carer groups

- 2.4 Vacancy Rates: We have previously acknowledged that in some clinical areas/wards there are vacancy levels that exceed the Trust target. The teams are committed to ensuring that this is addressed and that vacancy levels are reduced through active recruitment. We understand that the use of temporary staff can have a negative impact on patient and staff experience with regards to lack of continuity and consistency of staff. A bank recruitment drive commenced to improve continuity and consistency within the temporary workforce and includes; encouraging current agency staff to opt into the bank with competitive rates, additional funds for holidays and mandatory training. This drive to develop the bank of temporary staff addresses the decrease in agency usage.
- 2.5 We are developing a robust recruitment and retention plan as part of a whole systems approach through rigorous interviewing processes to obtain the right people with the right skills who demonstrate BEHMHT values and behaviours. We have developed our preceptorship programme aimed to better support newly trained staff into the clinical area and ensure staff are enabled to be the best that they can be.

### 3. Fill Rate

- 3.1 Table 1 gives an indication of overall fill rate between January 2015 and February 2017 across all inpatient wards, which shows little variance between both Registered and Care staff during this period. Wards continue to use temporary staff resources where needed due to clinical demands and to address the staff vacancies. Temporary staff who are identified as being familiar with the clinical setting are sort to ensure continuity and more positive patient experience and risk management.
- 3.2 Some wards continue to meet their fill rate compliance with the use of temporary staffing; both bank staff and agency staff. As described above, the focus now is to strengthen bank arrangements and reduce the use of agency.

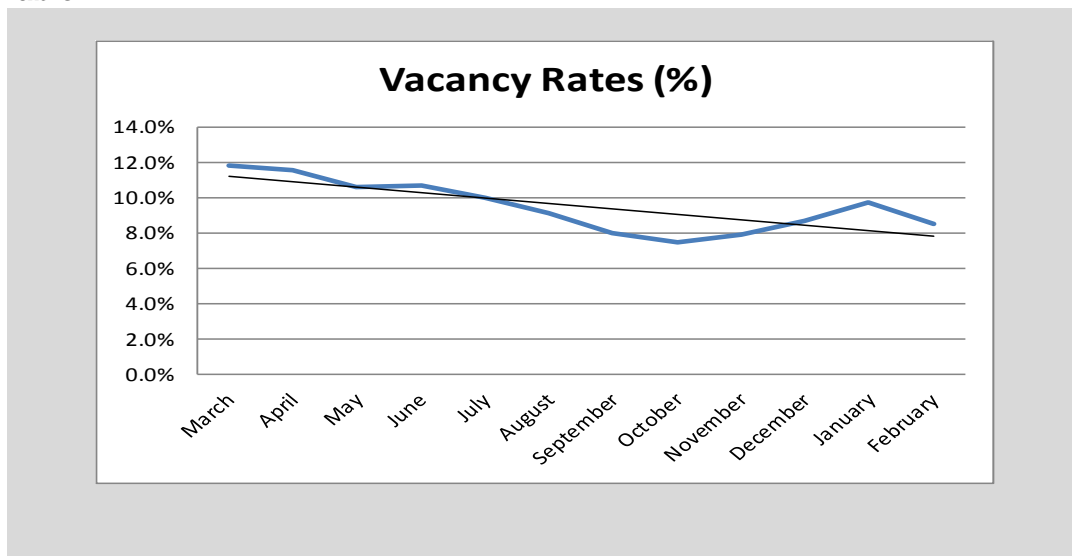
**Table 1**

		Registered Nurses Average Fill Rates - DAY (%)	Registered Nurses Average Fill Rates - NIGHT (%)	Care Staff Average Fill Rates - DAY (%)	Care Staff Average Fill Rates - NIGHT (%)
2015	January	101	102	98	99
	February	102	103	98	98
	March	102	102	98	99
	April	103	102	97	99
	May	100	102	98	99
	June	102	102	97	99
	July	100	98	98	100
	August	99	101	99	98
	September	100	100	98	99
	October	99	101	100	99
	November	100	100	101	101
	December	101	100	101	100
2016	January	101	100	100	100
	February	101	100	100	102
	March	101	103	101	102
	April	100	101	101	101
	May	102	101	99	100
	June	102	101	99	100
	July	100	101	100	101
	August	100	102	101	100
	September	101	101	102	103
	October	103	101	101	103
	November	102	102	102	103
	December	100	101	102	104
2017	January	103	101	104	103
	February	102	100	102	103

**4. Vacancy Factor**

4.1 The overall vacancy rate for our inpatient wards has seen an improvement this reporting period. For February 2017, it is 8.1% compared to 8.7% in December 2016 (Table 2).

**Table 2**

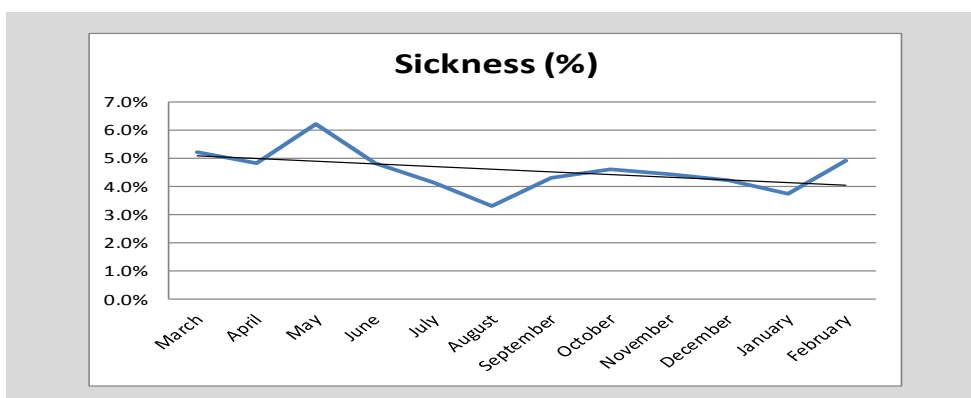


4.2 The focus on recruitment and retention needs to continue to ensure that vacancies across in-patient wards are minimised and trajectories are considered for each of the wards as part of the retention of staff and the proactive management of the number of staff who have expressed their intention to retire.

**5. Sickness Rate**

5.1 Overall sickness rates across in-patient wards continue to be under the last 12 months' peak of 6.1% in May 2016. However the overall sickness rate for February 2017 (4.9%) saw an increase of 0.7% from December 2016 rates. Whilst some areas appear to have proactive approaches to the management of sickness, this needs to be seen across all clinical areas and reiterated in managerial supervision of staff. A robust process in addressing sickness and absence indicates to staff our duty of care to them and to the patients who use our services. Where sickness is addressed robustly this can be learnt best practice across the trust.

**Table 3**



## **6. Barnet Borough**

- 6.1 Barnet Borough has seen an improvement in vacancy rates across all wards. Formal vacancy and recruitment groups have been established and continue to look at ways to address the challenge that vacancies pose to the service. Although Avon's rate remains high, it decreased significantly to 21.7% in February 2017 from 37.7% in December 2016.
- 6.2 Barnet Borough has presented a mixed picture in respect to sickness rates across inpatient services. Avon and Thames ward's showed a reduction in sickness rates for February 2017 from the December 2016 rates (Please see Appendix 2). Trent ward's rate increased significantly to 5% from 0.5% in December 2016 whilst Ken Porter is 4.6%, an increase of 0.7% from December rates.
- 6.3 Fill rates indicate that the staffing deficiencies have been met through temporary staffing which we continue to carefully monitor from a continuity, quality and safety perspective.
- 6.4 The Patient Experience Survey and FFT data within the Barnet inpatient wards shows considerable variation in relation to both; engagement with the surveys and the feedback received. Across January and February 2017; Trent and Thames ward's Patient Experience Survey and FFT feedback is very positive. Avon and Ken Porter ward Patient Experience Survey scores are below the 80% benchmark and the FFT suggest satisfaction rates could be improved significantly. Avon ward did not submit any data for Patient Experience and FFT for February 2017.
- 6.5 Four complaints (one formal and three informal) were received within the Barnet Borough inpatient wards between January 2017 and February 2017.

## **7. Enfield Borough**

- 7.1 Enfield Borough has presented a mixed picture in respect to vacancies across inpatient services. Across January and February 2017, Dorset, Magnolia and Suffolk wards have seen improvement in vacancy rates, Cornwall Villa, Silver Birches, Sussex and the Oaks rates increased whilst Somerset Villa (formally Bay Tree House) has remained unchanged since December 2016. Silver Birches and Somerset Villa wards continues to have significantly high vacancy rates of 33.3% and 26.5% respectively.
- 7.2 Compared with December 2016 rates; all wards have seen improvements in sickness rates in February 2017 except Somerset Villa which has increased in the same period.
- 7.2 Fill rates indicate that the staffing deficiencies have been met through temporary staffing which we continue to carefully monitor from a continuity, quality and safety perspective.
- 7.3 The Patient Experience Survey and FFT data within the Enfield Borough inpatient wards shows considerable variation in relation to both; engagement with the surveys and the feedback received. A number of the wards Patient Experience Survey percentages do not meet the Trust 80% benchmark and FFT data suggest satisfaction rates could be improved significantly. Areas of potential concern include: Suffolk, Sussex and The Oaks. It is noted that, The Oaks did not submit data for February 2017 whilst Silver Birches and Cornwall Villa have not submitted Patient Experience Survey and FFT data since September 2016, limiting assurance. The Deep Dive meetings will continue to discuss patient experience indicators and agree actions to address. The senior managers are aware and are addressing within the respective teams.
- 7.4 Four formal and one informal complaint were received within the Enfield Borough inpatient wards between January 2017 and February 2017.

## **8. Haringey Borough**

- 8.1 Haringey inpatient wards have seen an increase in vacancy rates with the exception of Haringey ward which has no vacancies for the period January 2017 to February 2017.
- 8.2 Fairland and Finsbury wards have seen increasing sickness rates across January 2017 to February 2017 whilst Haringey ward has seen a decrease in sickness rates in the same period.
- 8.3 Fill rates remain strong across all three wards.
- 8.4 The Patient Experience Survey and FFT data within the Haringey Borough inpatient wards shows considerable improvement in relation to both; engagement with the surveys and the feedback received with the exception of Haringey ward which FFT data suggest satisfaction rates could be improved significantly. It is noted that, Finsbury did not submit Patient Experience Survey and FFT data for February 2017.
- 8.5 Three formal and three informal complaints were received within the Haringey Borough inpatient wards between January 2017 and February 2017.

## **9. Specialist Services**

- 9.1 Across a number of Specialist Services inpatient wards there continues to be concerns in relation to vacancy rates, notably; Beacon Centre, Devon, and Sage wards. During the period from January 2017 to February 2017 vacancy rates continue to maintain and/or improve across the wards within the Specialist Services, with the exception of Beacon Centre and Devon wards which have significantly high and increasing vacancy rates that have remained unchanged across January 2017 to February 2017
- 9.2 Sickness rates have either maintained or decreased across almost all of the wards, with the exception of Beacon Centre and Tamarind wards which have seen some increase from January 2017 to February 2017. Tamarind ward saw a significant increase of 8% from December 2016 rates and has the highest levels of sickness at 11.9%.
- 9.3 The Patient Experience Survey and FFT data within the Specialist Services inpatient wards shows considerable variation in relation to both; engagement with the surveys and the feedback received. A number of the wards Patient Experience Survey percentages do not meet the Trust 80% benchmark and FFT data suggest satisfaction rates could be improved significantly, especially for Phoenix and Mint ward. The Deep Dive meetings will continue to discuss patient experience indicators and agree actions to address.
- 9.4 Eight complaints (seven formal and one informal) were received within the Specialist Services between January 2017 and February 2017.

## **10. Community Staffing Levels**

- 10.1 Unlike inpatient settings, there is no mandatory requirement for the Trust to publish information about the nurse staffing levels in our community care settings. However, the key staffing indicators measured for inpatient's safe staffing levels is currently being rolled out to all community teams to enable staffing capacity and capability of our community teams to be included in this report in the future.
- 10.2 The registered and unregistered nursing staff establishment in community team budgets are currently being reviewed to establish the accurate vacancy levels within the teams. This review is expected to be completed by April 2017.

- 10.3 The overall vacancy rate for registered and unregistered nurses in our community teams for February 2017 is 18.7%.
- 10.4 Overall sickness rates across community teams in February 2017 is 2.5%.

## **11. Recruitment and Resourcing**

### **11.1 Recruitment Surgeries**

The Trusts recruitment team hold a succession of recruitment surgeries across all boroughs on a 4 – 6 weekly basis. The purpose of the surgeries is to meet with borough managers to identify hard to fill recruitment 'hot spots' and any associated recruitment issues.

### **11.2 In-patient Staffing Recruitment**

The Trust aims to recruit to all inpatient staff vacancies and reduce the reliance on temporary staffing. There are several recruitment initiatives in place to fill vacancies across the Trust.

## **12. Summary**

- 12.1 Safe staffing reports continue to be incorporated into existing governance structures, namely Borough Deep Dive meetings, and will be incorporated into future borough based governance structures. This has allowed greater discussion and understanding of the data presented and analysed to ensure that the safe staffing agenda and associated quality and safety indicators are understood and acted upon to enhance safety in the clinical areas.
- 12.2 Safe staffing reports are made available to commissioners; promoting transparency and providing assurance in relation to the Trust monitoring of safe staffing in the context of a range of workforce, quality and patient experience indicators.
- 12.3 There is a need to ensure that the focus on recruitment is maintained to respond to the persistent staffing challenges that we face. The agency cap on spend can only be achieved and sustained if we accelerate substantive recruitment to all vacant posts. As well as recruit more external candidates for our Nurse Bank. Further work is also required in relation to the management of vacancies and sickness, with any lessons learnt and successful innovations shared within and across the service lines.

## **13. Outcomes, Service Delivery and Performance Issues**

- 13.1 To improve the understanding of workforce, their deployment and reduction in the reliance upon temporary staffing.
- 13.2 To improve understanding at a borough service line level of the areas of risk in respects to safe staffing, including interrelated and contributory factors.
- 13.3 To improve management of the workforce to maximise stability and consistency and enhance patient experience, quality and safety.
- 13.4 To consider and scope the requirements of the service areas and match this to current and future capacity.
- 13.5 To consider the investment in staff at all levels to assist in recruitment and retention activity.



## **Implications**

### **14. Budgetary / Financial Implications**

- 14.1 Financial costs associated with the procurement of electronic IT solutions to record and track staff usage.
- 14.2 A reduction in the reliance on temporary staff, and associated savings.

### **15. Risk Management**

- 15.1 Consistency in high calibre, well trained and competent staff will contribute to risk reduction and improved quality of care and patient experience. Investment in staff development will also assist in retaining high quality staff and assist in the recruitment of staff in the future.

### **16. Equality and Diversity Implications**

- 16.1 None

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Barnet - January 2017															
Hospital site name	Ward name	Speciality	Staffing Day		Staffing Night		Experience		Complaints		Incidents			Workforce	
			Average Fill Rate - registered nurses	Average Fill Rate - care staff	Average Fill Rate - registered nurses	Average Fill Rate - care staff	Patient Experience Survey	Patient Friends & Family (FFT)	Formal Complaints	Informal Complaints	Datix Incidents	Serious Incidents	Moderate Incidents	Vacancy Rate	Sickness
Edgware Community Hospital	Avon	Psychiatric Intensive Care Unit	97.1%	96.5%	96.9%	101.9%	65%	69%	1	0	29	0	0	27.5%	6.0%
Edgware Community Hospital	Thames Ward	Adult Mental Illness	100.0%	100.0%	100.0%	106.7%	88%	100%	0	1	45	0	0	2.2%	0.8%
Edgware Community Hospital	Trent Ward	Adult Mental Illness	100.0%	100.0%	93.5%	100.0%	95%	100%	0	0	42	0	0	10.8%	3.4%
Barnet General Hospital	Ken Porter	Adult Mental Illness, Old Age Psychiatry	120.4%	138.4%	100.0%	162.3%	70%	73%	0	0	30	1	0	7.7%	4.9%

Enfield - January 2017															
Hospital site name	Ward name	Speciality	Staffing Day		Staffing Night		Experience		Complaints		Incidents			Workforce	
			Average Fill Rate - registered nurses	Average Fill Rate - care staff	Average Fill Rate - registered nurses	Average Fill Rate - care staff	Patient Experience Survey	Patient Friends & Family (FFT)	Formal Complaints	Informal Complaints	Datix Incidents	Serious Incidents	Moderate Incidents	Vacancy Rate	Sickness
St Michael's Hospital	Magnolia Ward	General Medicine, Rehabilitation	99.0%	99.5%	96.8%	101.6%	99%	100%	0	0	35	0	0	12.9%	5.3%
Chase Farm Hospital	Dorset	Adult Mental Illness	104.2%	105.7%	99.0%	103.1%	93%	100%	0	0	12	0	0	9.6%	4.8%
Chase Farm Hospital	Suffolk Ward	Adult Mental Illness	95.1%	100.0%	100.0%	100.0%	70%	71%	0	0	24	0	0	6.1%	5.3%
Chase Farm Hospital	Sussex Ward	Adult Mental Illness	100.0%	100.0%	100.0%	98.5%	69%	80%	0	0	13	0	0	8.3%	1.2%
Chase Farm Hospital	Somerset Villa (Formerly Bay Tree House)	Old Age Psychiatry	99.5%	100.0%	100.0%	100.0%	93%	80%	0	0	1	0	0	26.5%	6.6%
Chase Farm Hospital	The Oaks	Old Age Psychiatry	106.2%	97.3%	100.0%	100.0%	47%	67%	0	0	21	0	0	2.7%	2.6%
Chase Farm Hospital	Cornwall Villa	Old Age Psychiatry	112.9%	92.8%	107.9%	97.1%	-	-	1	0	24	1	0	-2.1%	0.2%
Chase Farm Hospital	Silver Birches	Old Age Psychiatry	118.1%	92.8%	100.0%	98.9%	-	-	0	0	16	0	0	33.3%	1.3%

Haringey - January 2017															
Hospital site name	Ward name	Speciality	Staffing Day		Staffing Night		Experience		Complaints		Incidents			Workforce	
			Average Fill Rate - registered nurses	Average Fill Rate - care staff	Average Fill Rate - registered nurses	Average Fill Rate - care staff	Patient Experience Survey	Patient Friends & Family (FFT)	Formal Complaints	Informal Complaints	Datix Incidents	Serious Incidents	Moderate Incidents	Vacancy Rate	Sickness
St Ann's Hospital	Fairlands	Adult Mental Illness	106.5%	152.1%	100.0%	136.6%	80%	100%	0	0	12	0	1	4.0%	4.2%
St Ann's Hospital	Finsbury	Adult Mental Illness	100.0%	100.0%	100.0%	100.0%	89%	100%	1	1	28	0	1	-2.4%	4.1%
St Ann's Hospital	Haringey Ward	Adult Mental Illness	115.1%	100.0%	131.0%	100.0%	76%	60%	1	0	12	0	0	-11.7%	1.8%

Specialist - January 2017															
Hospital site name	Ward name	Speciality	Staffing Day		Staffing Night		Experience		Complaints		Incidents			Workforce	
			Average Fill Rate - registered nurses	Average Fill Rate - care staff	Average Fill Rate - registered nurses	Average Fill Rate - care staff	Patient Experience Survey	Patient Friends & Family (FFT)	Formal Complaints	Informal Complaints	Datix Incidents	Serious Incidents	Moderate Incidents	Vacancy Rate	Sickness
Chase Farm Hospital	Cardamom	Forensic Psychiatry	95.1%	103.5%	100.0%	100.0%	97%	100%	0	0	7	0	0	8.5%	3.6%
Chase Farm Hospital	Blue Nile House	Forensic Psychiatry	98.1%	97.8%	100.0%	100.0%	93%	86%	1	0	4	0	0	-1.3%	4.7%
Chase Farm Hospital	Fennel	Forensic Psychiatry	98.9%	99.5%	100.0%	100.0%	-	-	0	0	12	0	0	4.4%	0.7%
Chase Farm Hospital	Juniper	Forensic Psychiatry	100.0%	173.6%	103.1%	98.4%	81%	50%	0	0	9	0	0	10.6%	4.3%
Chase Farm Hospital	Mint	Forensic Psychiatry, Learning Disability	99.3%	98.5%	100.0%	100.0%	80%	78%	0	0	14	0	0	6.4%	1.9%
Chase Farm Hospital	Paprika	Forensic Psychiatry	100.5%	99.8%	103.3%	100.0%	91%	100%	0	0	8	0	0	-8.0%	0.5%
Chase Farm Hospital	Sage Ward	Forensic Psychiatry	100.0%	100.0%	96.0%	100.0%	93%	88%	0	0	14	0	0	23.1%	4.0%
Chase Farm Hospital	Devon Ward	Forensic Psychiatry	100.0%	98.8%	100.0%	100.0%	98%	100%	2	0	5	0	0	26.7%	3.9%
Chase Farm Hospital	Tamarind Ward	Forensic Psychiatry	105.7%	102.6%	100.0%	100.0%	98%	89%	1	0	23	0	0	4.4%	4.2%
Chase Farm Hospital	Severn	Forensic Psychiatry	98.4%	94.2%	100.0%	100.0%	98%	77%	0	0	4	0	0	8.4%	6.7%
Chase Farm Hospital	Derwent	Forensic Psychiatry	117.4%	113.5%	100.0%	100.0%	91%	92%	0	0	12	0	0	-13.0%	9.7%
Edgware Community Hospital	Beacon Centre	Child and Adolescent Psychiatry	100.0%	99.7%	100.0%	101.0%	84%	85%	0	0	36	0	0	21.5%	8.8%
St Ann's Hospital	Phoenix	Adult Mental Illness	98.0%	101.9%	100.0%	101.9%	45%	42%	0	0	11	0	0	14.1%	0.8%

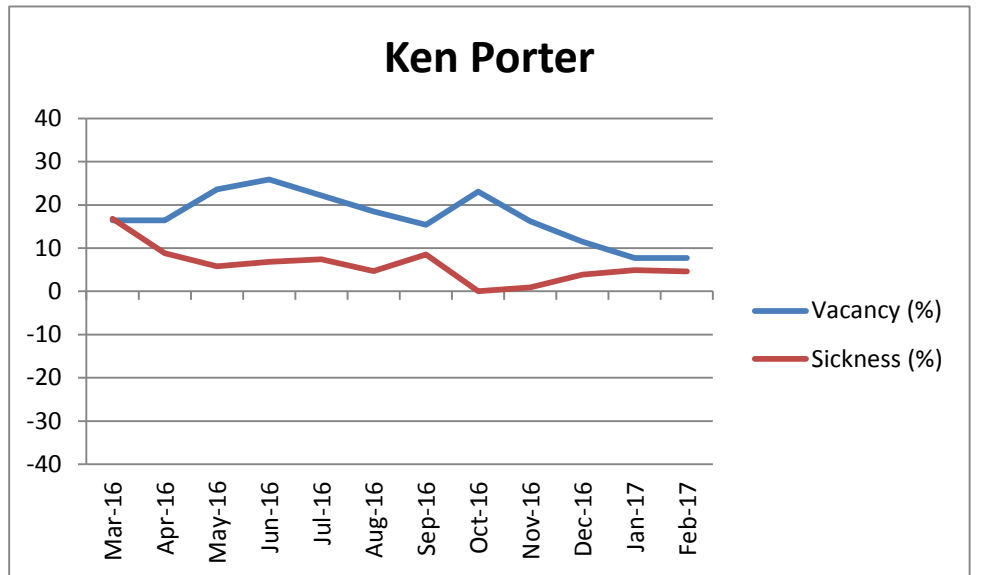
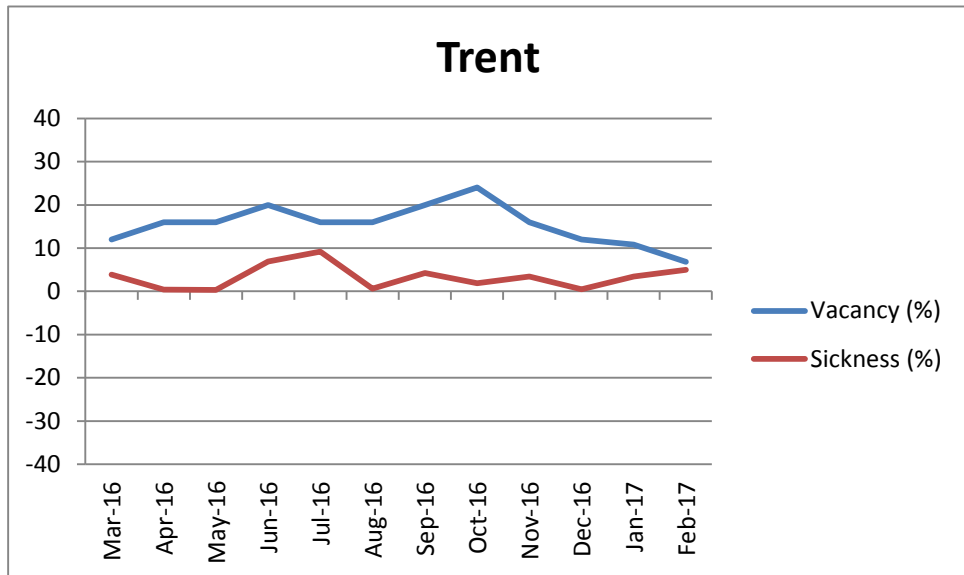
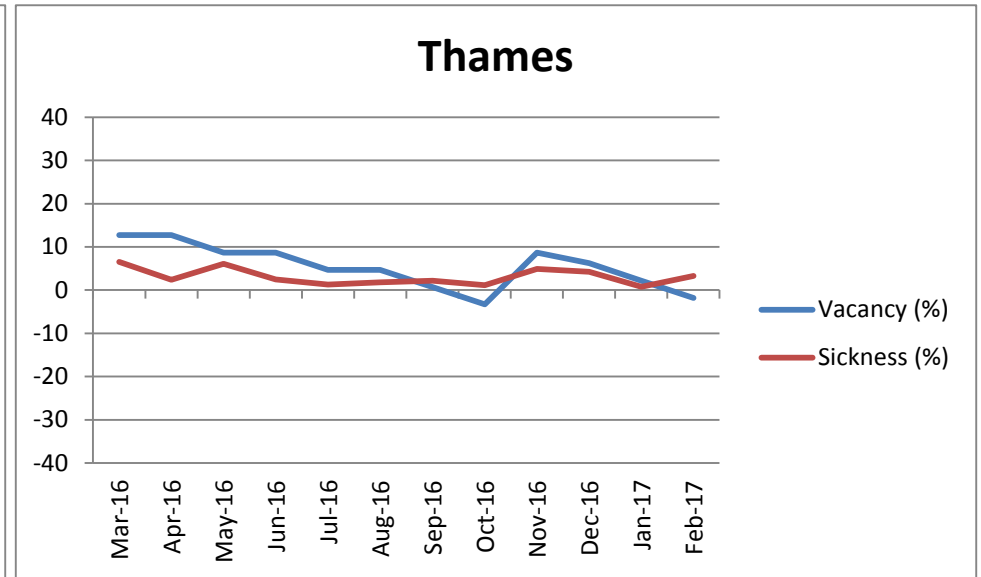
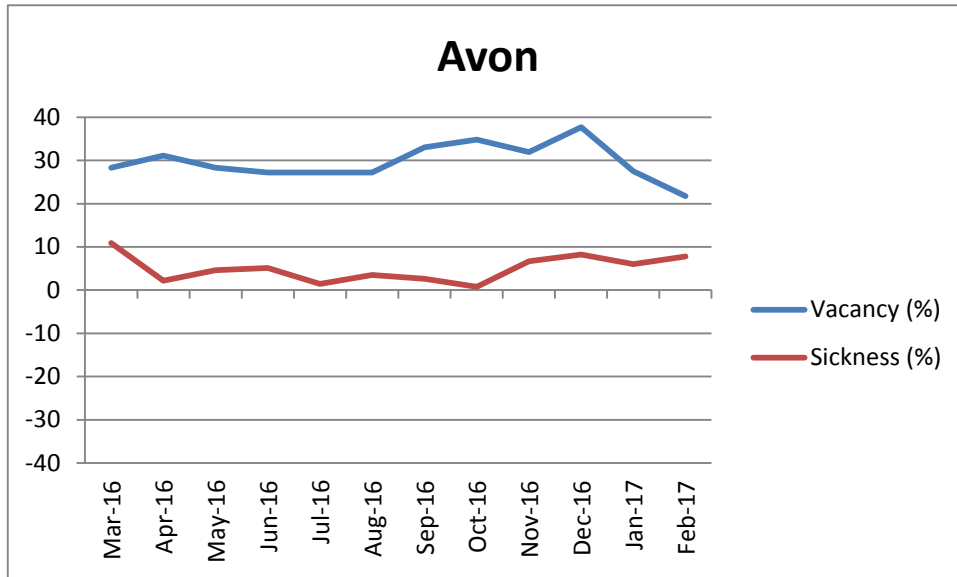
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Edgware Community Hospital	Thames Ward	Adult Mental Illness	100.0%	100.0%	100.0%	100.0%	88%	88%	0	0	47	0	0	-1.8%	3.7%
Edgware Community Hospital	Trent Ward	Adult Mental Illness	100.0%	99.1%	100.0%	100.0%	93%	93%	0	0	28	0	0	6.8%	5.0%
Barnet General Hospital	Ken Porter	Adult Mental Illness, Old Age Psychiatry	100.9%	134.5%	100.0%	155.4%	76%	85%	0	0	17	0	1	7.7%	4.6%

Enfield - February 2017															
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			Average Fill Rate - registered nurses	Average Fill Rate - care staff	Average Fill Rate - registered nurses	Average Fill Rate - care staff	Patient Experience Survey	Patient Friends & Family (FFT)	Formal Complaints	Informal Complaints	Datix Incidents	Serious Incidents	Moderate Incidents	Vacancy Rate	Sickness
St Michael's Hospital	Magnolia Ward	General Medicine, Rehabilitation	97.8%	100.5%	98.8%	103.4%	100%	100%	0	0	35	0	0	8.9%	5.4%
Chase Farm Hospital	Dorset	Adult Mental Illness	145.2%	119.6%	100.0%	114.3%	88%	100%	0	1	18	0	0	1.6%	5.9%
Chase Farm Hospital	Suffolk Ward	Adult Mental Illness	100.0%	100.0%	100.0%	102.8%	87%	40%	1	0	32	0	0	2.1%	5.3%
Chase Farm Hospital	Sussex Ward	Adult Mental Illness	104.4%	95.1%	103.6%	94.3%	70%	78%	1	0	12	0	0	12.3%	1.0%
Chase Farm Hospital	Somerset Villa (Formerly Bay Tree House)	Old Age Psychiatry	100.0%	100.0%	100.0%	100.0%	85%	60%	0	0	0	0	0	26.5%	7.7%
Chase Farm Hospital	The Oaks	Old Age Psychiatry	101.7%	94.2%	100.0%	100.0%	-	-	1	0	43	0	0	9.1%	0.6%
Chase Farm Hospital	Cornwall Villa	Old Age Psychiatry	98.7%	101.7%	100.0%	100.0%	-	78%	0	0	12	0	0	1.4%	1.3%
Chase Farm Hospital	Silver Birches	Old Age Psychiatry	105.4%	95.7%	100.0%	100.0%	-	-	0	0	10	0	0	33.3%	1.8%

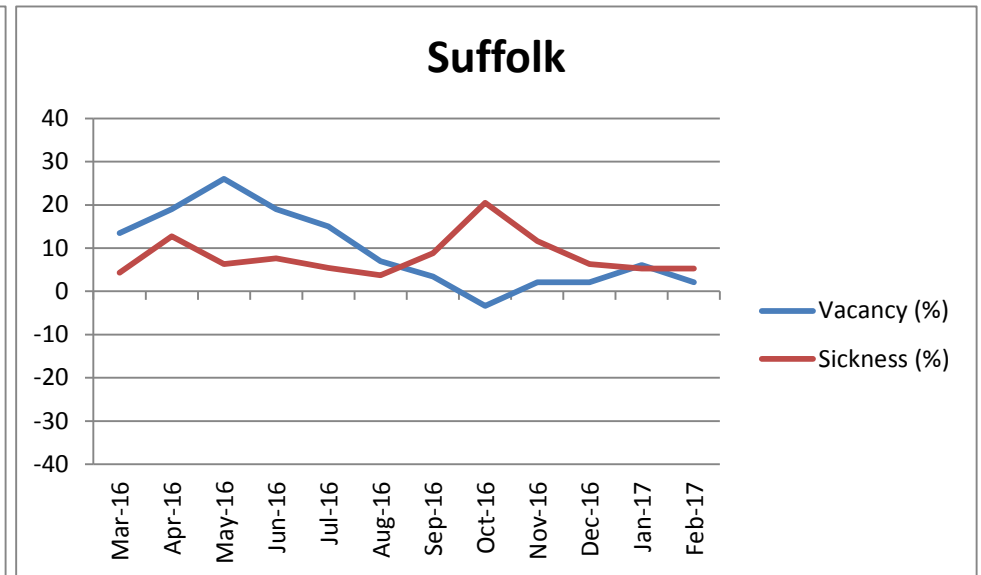
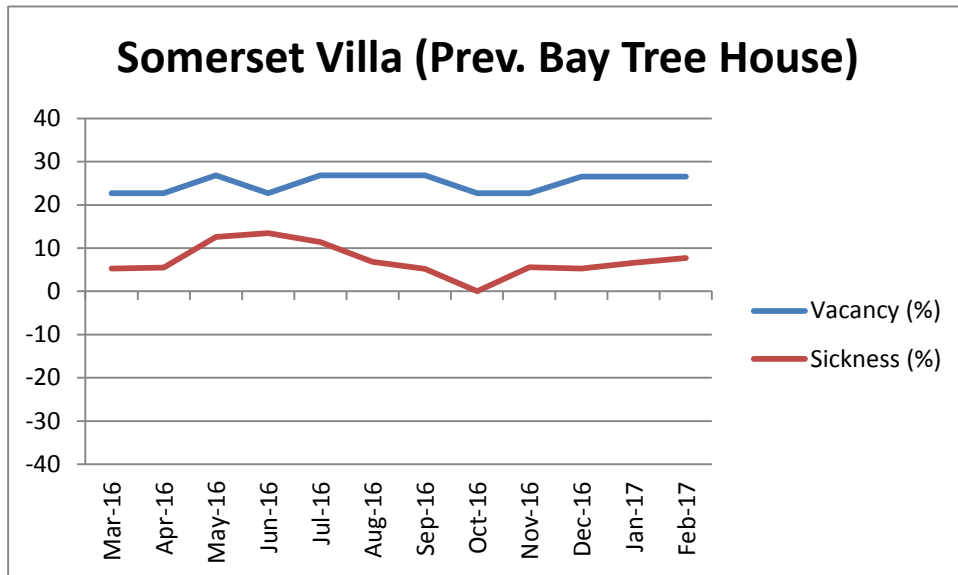
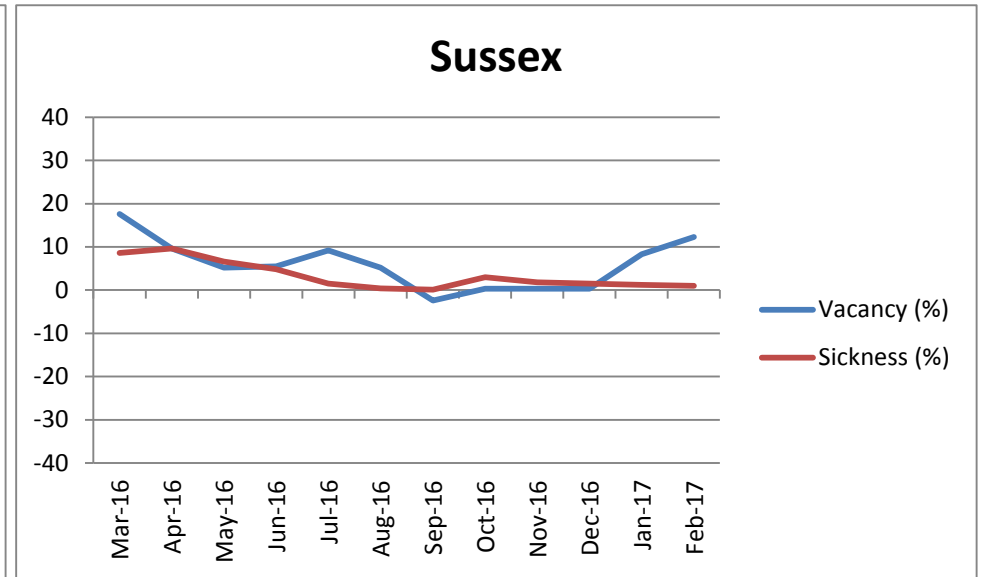
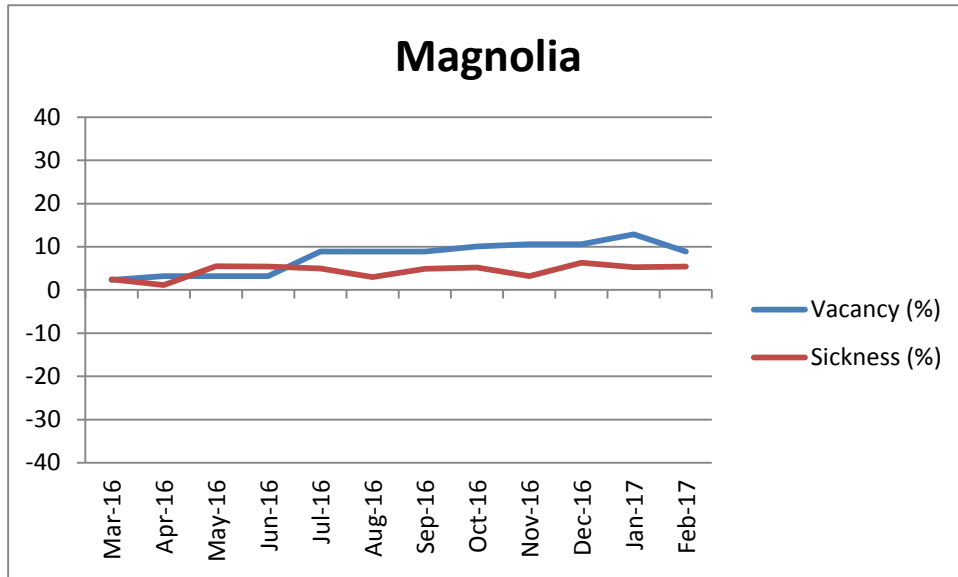
Haringey - February 2017															
Hospital site name	Ward name	Speciality	Staffing Day		Staffing Night		Experience		Complaints		Incidents			Workforce	
			Average Fill Rate - registered nurses	Average Fill Rate - care staff	Average Fill Rate - registered nurses	Average Fill Rate - care staff	Patient Experience Survey	Patient Friends & Family (FFT)	Formal Complaints	Informal Complaints	Datix Incidents	Serious Incidents	Moderate Incidents	Vacancy Rate	Sickness
St Ann's Hospital	Fairlands	Adult Mental Illness	102.7%	150.0%	100.0%	118.2%	86%	100%	1	1	29	0	1	8.0%	5.1%
St Ann's Hospital	Finsbury	Adult Mental Illness	100.0%	101.2%	100.0%	106.8%	-	-	0	0	26	0	1	1.6%	16.4%
St Ann's Hospital	Haringey Ward	Adult Mental Illness	100.0%	100.0%	100.0%	100.0%	91%	55%	0	1	15	0	0	-11.7%	1.4%

Specialist - February 2017															
Hospital site name	Ward name	Speciality	Staffing Day		Staffing Night		Experience		Complaints		Incidents			Workforce	
			Average Fill Rate - registered nurses	Average Fill Rate - care staff	Average Fill Rate - registered nurses	Average Fill Rate - care staff	Patient Experience Survey	Patient Friends & Family (FFT)	Formal Complaints	Informal Complaints	Datix Incidents	Serious Incidents	Moderate Incidents	Vacancy Rate	Sickness
Chase Farm Hospital	Cardamom	Forensic Psychiatry	92.6%	112.1%	100.0%	100.0%	96%	78%	2	0	19	1	0	8.5%	2.1%
Chase Farm Hospital	Blue Nile House	Forensic Psychiatry	99.1%	100.9%	100.0%	100.0%	99%	100%	0	0	3	0	0	2.2%	3.8%
Chase Farm Hospital	Fennel	Forensic Psychiatry	106.3%	100.7%	100.0%	102.2%	95%	90%	0	0	8	1	0	2.6%	1.1%
Chase Farm Hospital	Juniper	Forensic Psychiatry	100.0%	96.0%	98.5%	97.8%	75%	83%	0	0	13	0	0	2.7%	3.0%
Chase Farm Hospital	Mint	Forensic Psychiatry, Learning Disability	100.7%	101.1%	100.0%	100.0%	68%	56%	0	0	10	0	0	2.1%	3.4%
Chase Farm Hospital	Paprika	Forensic Psychiatry	99.1%	99.6%	100.0%	96.6%	96%	80%	0	0	18	0	0	-8.0%	3.6%
Chase Farm Hospital	Sage Ward	Forensic Psychiatry	100.0%	100.0%	100.0%	100.0%	88%	73%	0	0	14	0	0	14.4%	5.1%
Chase Farm Hospital	Devon Ward	Forensic Psychiatry	99.9%	103.2%	92.9%	100.0%	86%	100%	0	0	12	0	0	26.7%	3.4%
Chase Farm Hospital	Tamarind Ward	Forensic Psychiatry	99.1%	100.9%	100.0%	100.0%	96%	100%	0	0	11	0	0	4.4%	11.9%
Chase Farm Hospital	Severn	Forensic Psychiatry	98.3%	97.0%	98.0%	103.9%	94%	57%	0	0	6	0	0	8.4%	6.5%
Chase Farm Hospital	Derwent	Forensic Psychiatry	98.8%	117.5%	102.9%	100.0%	98%	100%	0	0	12	0	0	-13.0%	8.0%
Edgware Community Hospital	Beacon Centre	Child and Adolescent Psychiatry	97.9%	98.6%	100.0%	100.0%	82%	100%	0	0	15	0	0	21.5%	11.7%
St Ann's Hospital	Phoenix	Adult Mental Illness	97.7%	97.2%	100.0%	115.2%	51%	40%	1	1	11	0	0	10.3%	2.7%

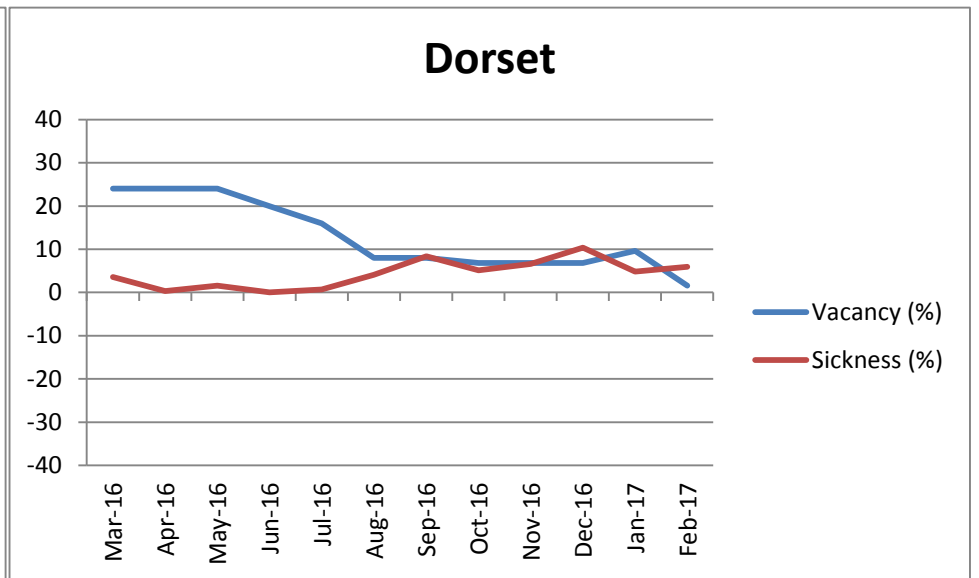
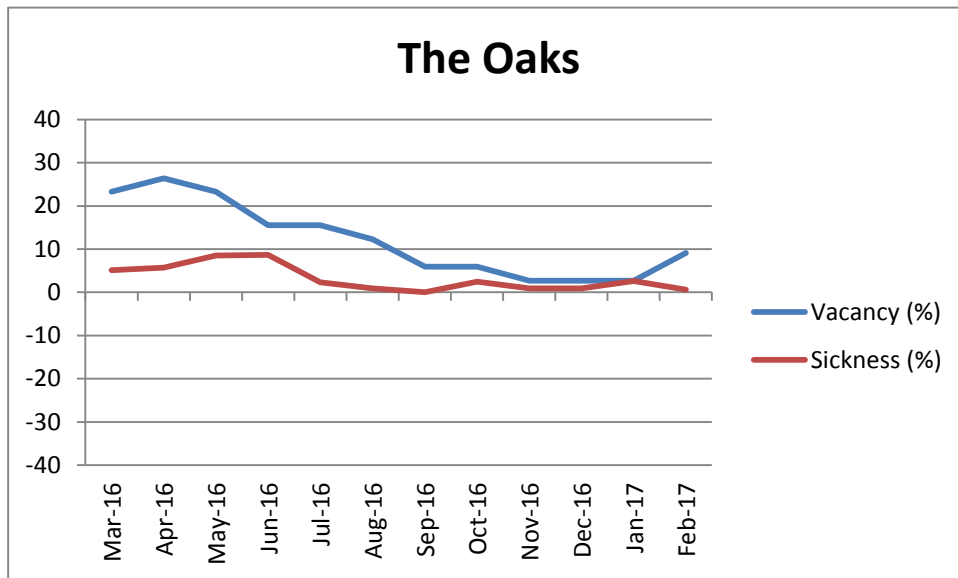
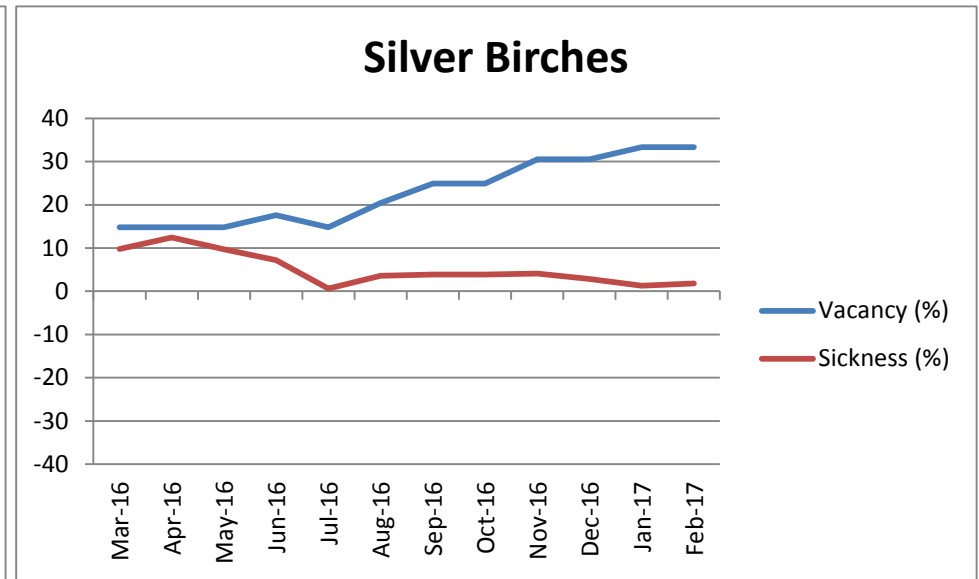
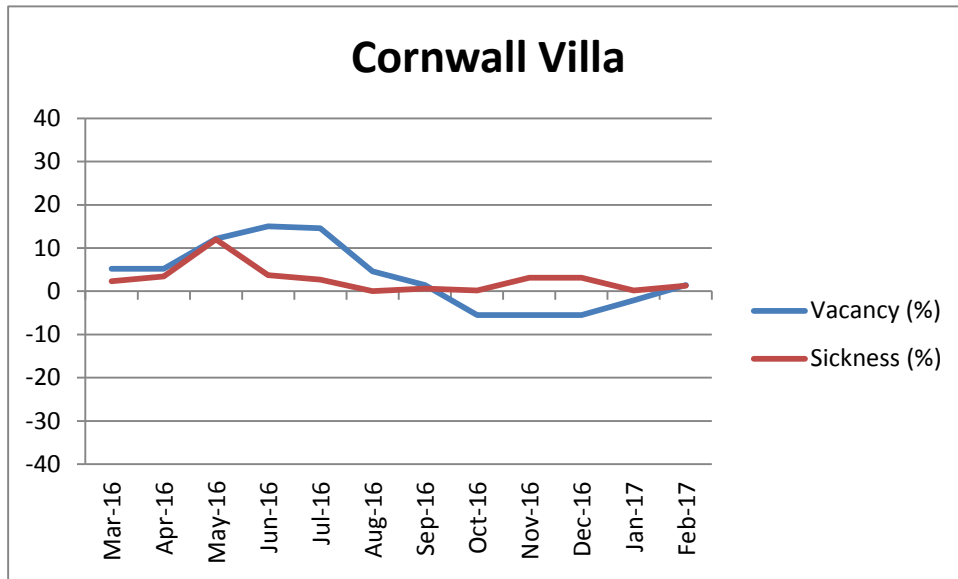
**BARNET**



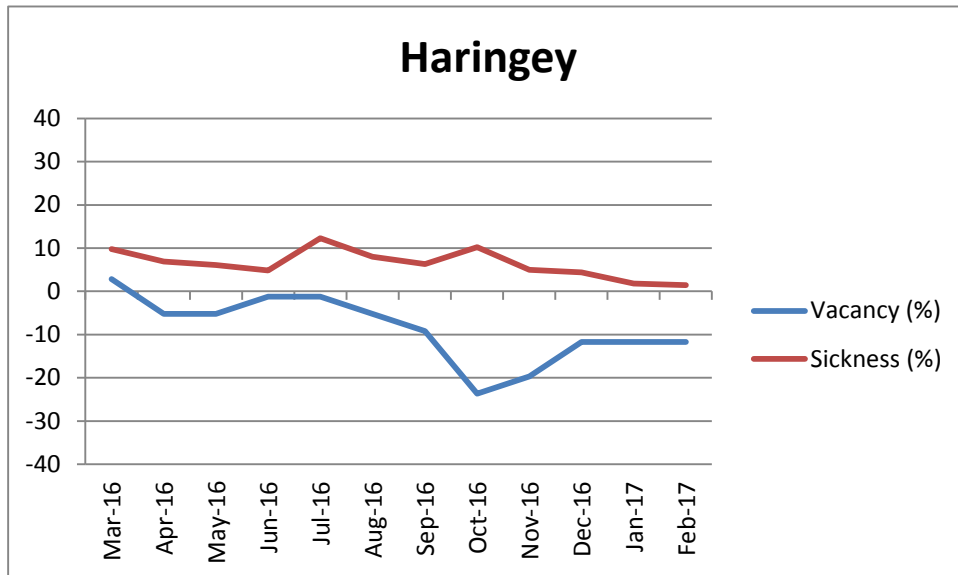
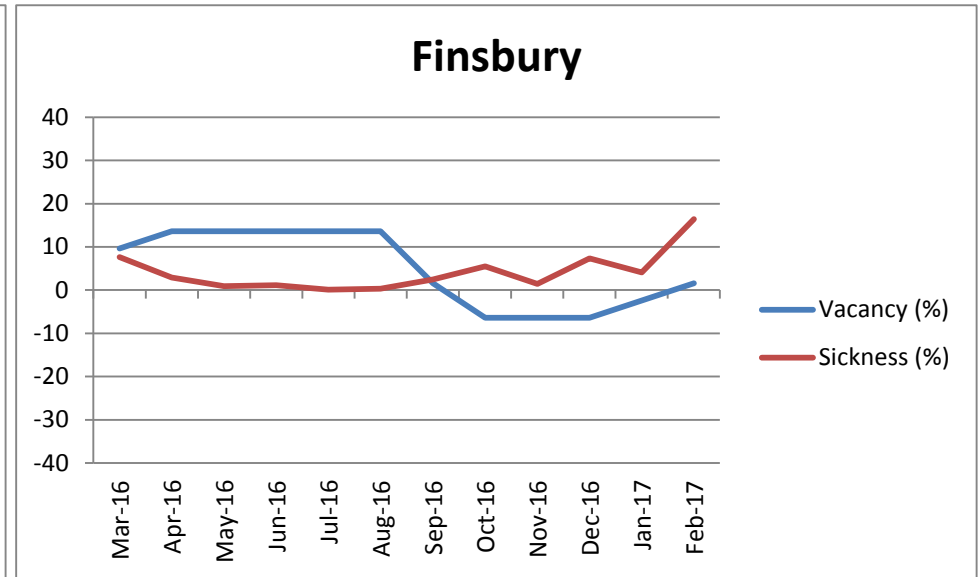
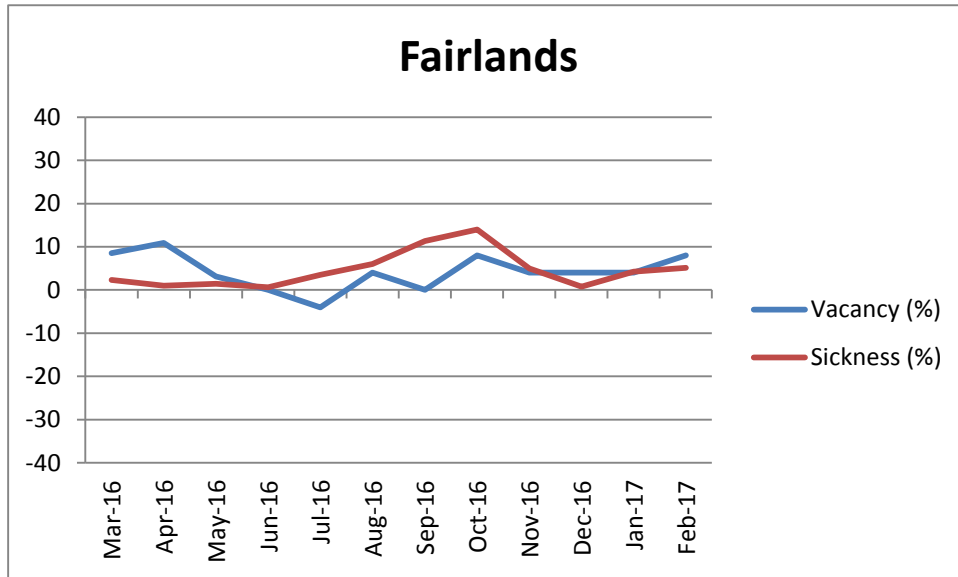
**ENFIELD**







**HARINGEY**



**SPECIALIST SERVICES**

