

## Board of Directors' Meeting Report – 5 October 2016

### Agenda item 84/16

<b>Title</b>	Nursing Establishment - 6 Monthly Staffing Review
<b>Sponsoring Director</b>	Yvonne Blucher - Chief Nurse
<b>Authors</b>	Sally Ashdown and Kathy Maloney, Practice Development
<b>Purpose</b>	To inform the Trust Board of in-patient nurse staffing requirements against workforce and quality metrics and provide recommendations for the staffing levels required to maintain safe care for patients.
<b>Previously considered at</b>	Executive Meeting, 21 September 2016
<b>Executive Summary</b>	
<p>The aim of this report is to provide an overview of the previous 6 months activity in relation to the nursing staffing position within Southend University Hospital NHS Foundation Trust and highlight actions taken where fluctuations have occurred and how these actions have/will reduce the impact on the quality of nursing care provided to our patients.</p> <p>A comprehensive review of staffing levels on each ward was undertaken with the Heads of Nursing in each directorate, with nursing establishments being agreed in August and budgets were rebased accordingly from 1<sup>st</sup> September 2016. The temporary bed closures put in place in January 2016 were taken in to account and a further review of this will take place in line with the recruitment of new staff to fill the vacancies.</p>	
<b>Date Reviewed by Execs.</b>	21 September 2016
<b>Related Trust Objective</b>	Excellent Patient Outcomes Excellent Patient Experience Engaged and Valued Staff Financial and Operational Sustainability – Financial, Operational, Estate
<b>Related Risk</b>	Risk 1 – Failure to provide adequate patient safety and quality of care Risk 2 – Poor patient experience
<b>Essex Success Regime</b>	No impact.
<b>Legal implications / regulatory requirements</b>	CQC: Failure to demonstrate that our services are safe, effective, caring, responsive and well-led may lead breach of licencing conditions. The Trust is required by the Department of Health to publish monthly staffing information. Regulatory implications in terms of governance and finance. NHS England and our regulators expect organisations to ensure that staffing capacity and capability are appropriately funded, maintained and monitored.
<b>Quality assessment impact</b>	Staffing levels must be at an appropriate level to provide safe patient care. The impact on quality will be dependent upon the registered nurse to patient ratio, acuity and dependency of patients and the skills and abilities of the staff.

<b>Equality assessment</b>	<b>impact</b> Adequate nurse staffing levels will allow the ratio of nurses, according to the acuity and dependency of vulnerable patients, to provide safe care. Monitoring the outcomes will enable us to understand the impact on care including patients with protected characteristics of age and disability.
<b>Recommendations:</b> The Board is asked to note and receive assurance from the report.	

## 6 Month Nurse Staffing Workforce Review January-July 2016

### Introduction

The aim of this report is to provide an overview of the previous 6 months position in relation to the nursing staffing levels within Southend University Hospital NHS Foundation Trust. It will highlight actions taken where fluctuations have occurred and how these actions have reduced /will reduce the impact on the quality of nursing care provided to our patients.

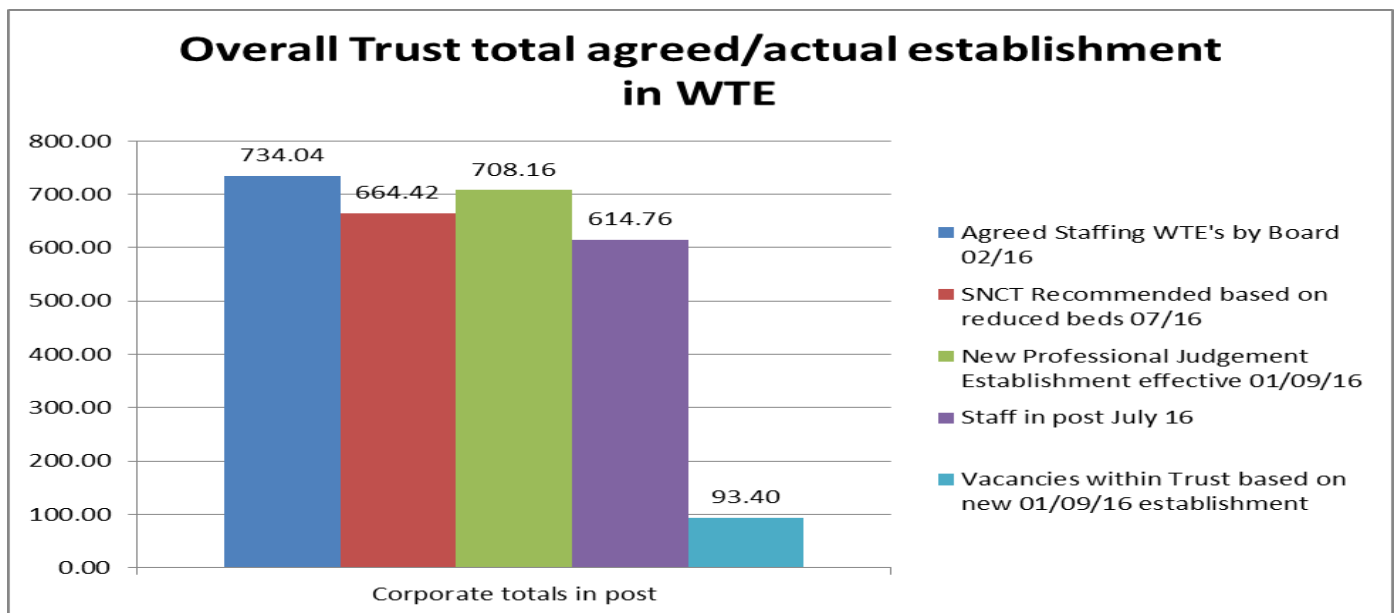
Comprehensive staffing reviews are completed and reported at the Trust board meeting on a bi-monthly basis, where the Trust Board receives assurance about the management of nurse staffing levels on the ward and the associated quality, safety and patient experience indicators.

### Scope of the Review

This report provides a review of the inpatient nurse staffing levels following the SNCT assessment undertaken in July 2016, with comparison to the staffing levels agreed by the Board in February 2016 and the professional Judgement review in August 2016. It will also provide a projection for the future.

### January - July 2016 Establishment Review

Following the CQC visit and report in February 2016 and the concerns raised therein about staffing and the on-going recruitment and retention challenges facing the Trust in relation to nursing staffing levels on in-patient wards, the decision was taken by the Chief Executive to reduce bed capacity in a number of wards to maintain patient safety.



As is evident from the above chart, the most recent professional judgement review of staffing, undertaken in August 2016 and effective from 1<sup>st</sup> September 2016 has reduced the overall required number of staff (to provide a safe environment and care for our patients) from 734.04 WTE to 708.16 WTE. This has taken in to consideration case-mix and changes in bed capacity planned in relation to the recruitment pipeline for registered nurses that will be starting on the wards in the coming weeks. Comparison between the August 2016 Professional judgement WTE and in post WTE for July 2016 has identified a vacancy level of 93.4 within the inpatient ward areas. This does not include out-patient areas and day stay / assessment areas.

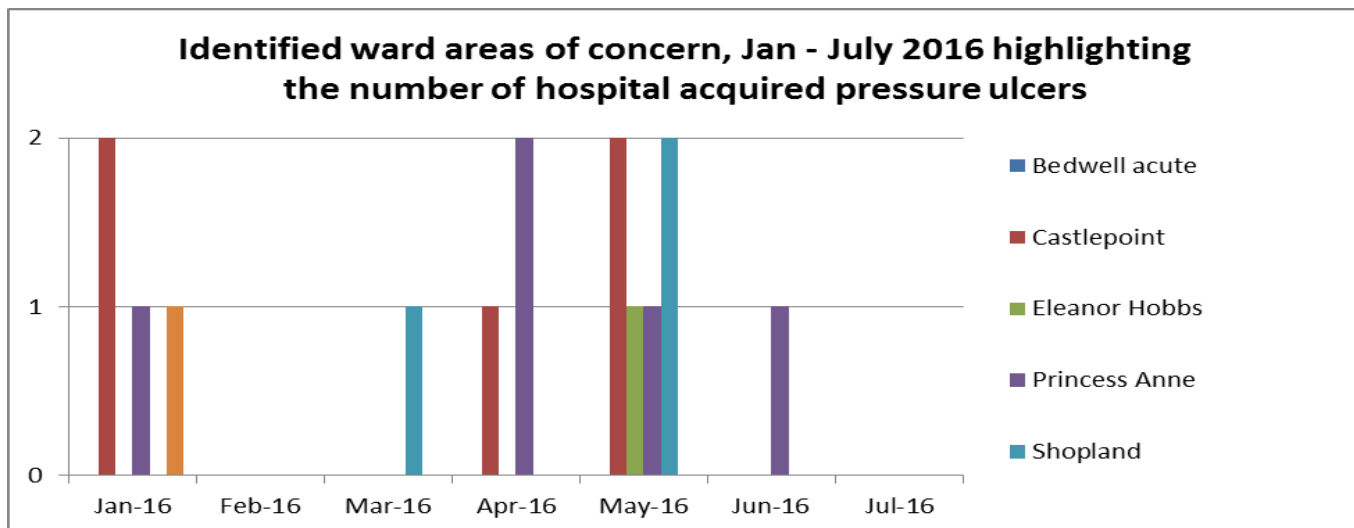
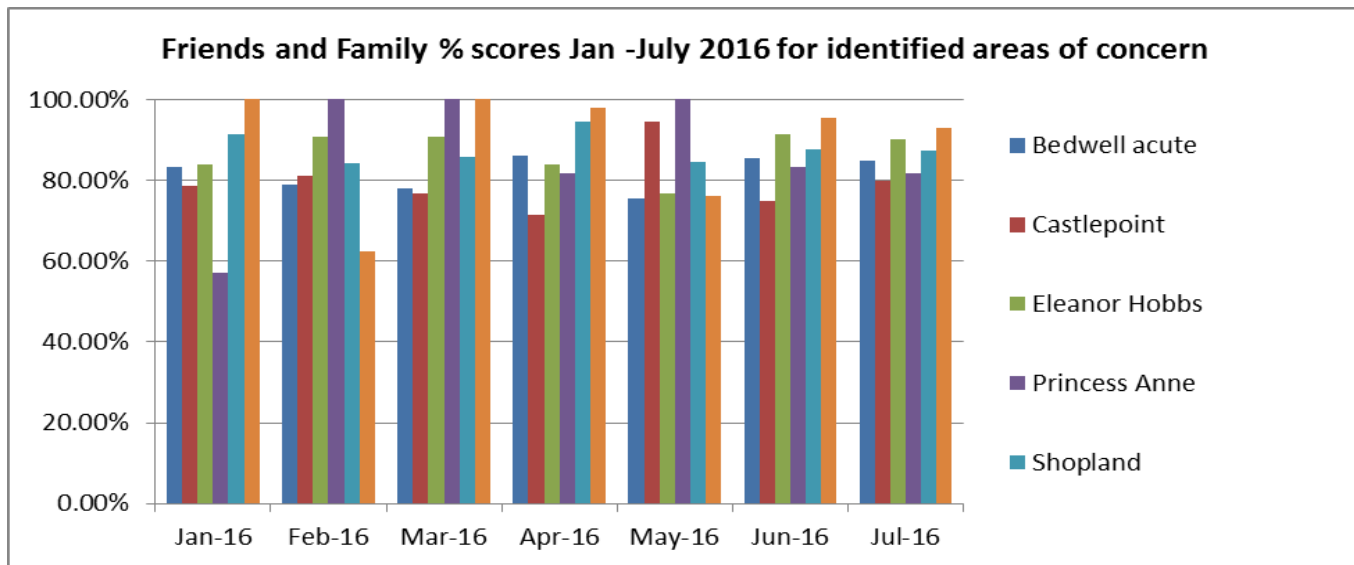
### Areas of concern

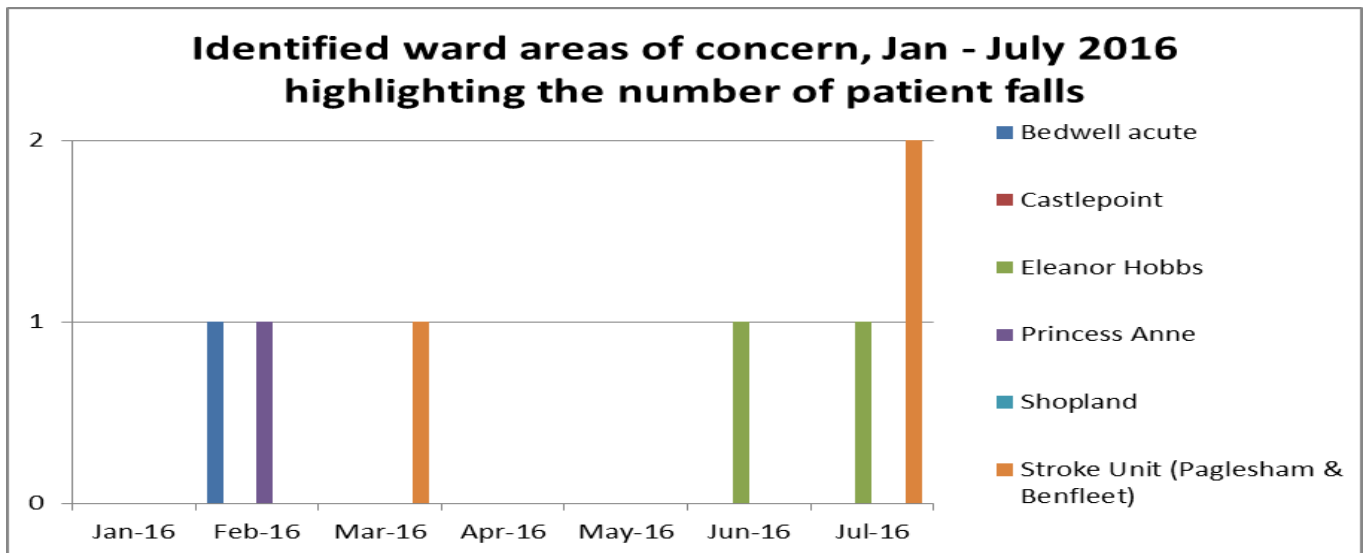
The following areas were identified as a priority for recruitment at the beginning of the year in order to achieve the required staffing levels to maintain safe care and improve quality and patient experience: Eleanor Hobbs, Stroke Unit, Princess Anne and Bedwell Acute Medical Service (BAMS), Castlepoint

and Shopland Ward. These concerns have been mitigated somewhat by closing beds within specific areas. The monthly monitoring of staffing levels and quality, safety and patient experience metrics is reported to the Trust Board to provide assurance that our patients receive safe care.

Since the beginning of 2016 there has been an increase in admissions of patients with acute medical conditions, exacerbations of long term conditions and a high number of patients whose condition is stable and require a greater level of supervision or assistance with fundamental care (level 1B) are being cared for in the general ward areas. This has increased the non-registered, health care assistant staffing requirements for some areas. This was identified in the professional judgement review undertaken in conjunction with the heads of nursing.

**Key Quality Metrics for Wards highlighted as areas of concern Jan-July 2016 (Pressure Ulcers, Falls and Friends & Family % scores)**





### Conclusion

The ward areas underwent reviews with both finance and Senior Nurses at the beginning of the 2016 financial year at which time the budgets were reviewed and revised. The Chief Nurse and Senior nurses have recently August 2016 undertaken a Professional Judgement review of ward staffing levels will be implemented in September 2016.

It is recommended that flexibility of staffing remains key to ensuring safe staffing levels, with daily risk assessments and the movement of staff within the Trust to wherever the patient need is greatest. Staffing levels are discussed and risks assessed on a daily basis at the safe@southend meeting and at bed meetings throughout the day.

Establishments, vacancies and quality and safety metrics will continue to be monitored to ensure the high priority areas receive the planned new overseas and newly qualified nurses starting in the organisation first. This is an on-going process and establishments will be reassessed according to subsequent review findings.

### Recommendations / way forward

- The SNCT data collection will continue to be monitored continuously and staff moved flexibly following the senior nursing review as required.
- Establish Safer Care Nursing Panels to discuss staffing levels on a monthly basis. These Panels should be comprised of Ward managers, Matrons, Senior Nurses and Finance.
- Quality and safety data should be made available to these meetings/Panels to inform decisions and professional judgements around nurses' establishment requirements.
- Review the current time-out/headroom percentage and increase to a minimum of 22% in line with the recommendation made by SNCT
- Continue with the care hours per patient day data collection in order to better understand the significance of the data in relation to other regional trusts
- Participation in the Model Hospital Dashboard, when available and ensure that the dataset from this is regularly discussed at the Board Meetings
- The Trust Board is asked to discuss and note the recommended staffing levels.

**NB: This report should be read in conjunction with the bi-monthly nurse staffing report**