

Board of Directors

Subject: Nurse Staffing Report
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This report provides an overview of the nursing and midwifery staffing position for April 2015. A more comprehensive staffing report was submitted to the Trust Board in April 2015.

The overall nurse staffing fill rate for April 2015 was recorded as 102.9% this figure is inclusive of Registered Nurses / Midwives (RN/M) and Health Care Assistants (HCA) during day and night duty periods. Of the 30 wards surveyed a total of 4 wards recorded a Registered Nurse fill rate of less than 90%.

Analysis of our planned and actual nurse staffing levels demonstrates that the majority of wards fulfil the required standards. Where it is identified that a clinical area has fallen below the required standard an exception report is generated by respective Divisional Matrons in order to gain a greater understanding of the reasons why this has occurred and to seek assurance that robust plans are in place to mitigate against further occurrences.

The establishment of a robust and formalised nurse staffing reporting mechanism in conjunction with and triangulation of the Ward Assurance Framework collectively provide a comprehensive overview of each ward. This rich data source enables the Divisional Matron (DM) and Matron, along with the Ward Sister / Charge Nurse to focus attention and resources on clinical areas that may require additional support or escalation.

From an Emergency Care & Medicine Divisional perspective the actual nurse staffing fill rates reported during April fluctuated between 92.9% and 165%; The month saw an overfill for Health Care assistants (HCA) on both day and night shifts across all the inpatient medical wards with the exception of wards 34 and the Stroke unit. This was due to a patients being admitted who were assessed as requiring higher levels of enhanced care. This included a significant increase in the number of patients who were placed under a Deprivation of Liberty (DOL) which was as at an all-time high with 4 patients during the month all of whom had a prolonged length of stay and required level 4 or 1-1 nursing supervision at all times. Despite using the differing available strategies and the expert support of the specialist teams such as the falls and dementia nurses additional staffing was still required on many occasions to maintain patient safety in line with the enhanced care policy.

The surgical division is currently co-horting patients whom require 1-1 care on two wards rather than spreading across the division. Newark continues to have vacancies. A local recruitment campaign is being planned to support Newark nurse recruitment

A number of wards are currently in the process of transitioning to the revised nursing establishments as agreed within the first milestone of the investment programme.

The inpatient wards, in particular medicine, are particularly reliant on the use of bank and agency nurses to bridge gaps. This risk is managed consistently by the ward sisters and matrons to ensure staffing risks are mitigated. On-going recruitment to posts is continuing at pace with a number of successes since the launch of the Nursing and Midwifery Recruitment and Retention Strategy. Nurse Staffing does remain a challenge at SFH and remains a key focus of action and attention from senior nurses

Our bed base has been reduced to help manage the risk and ensure our patients are cared for in safe environments, e.g. Ward 21 and Sconce Ward beds.

Recommendation

The Board are asked to:

- Note the outcomes of the UNIFY submission
- Understand mechanisms are in place to manage the current risk in relation to nurse staffing.
- Recognise the current strategies that are being employed to manage the current bed base, including the closure of ward 21 and Scone ward beds to reduce our staffing risks.