Sherwood Forest Hospitals **NHS**

NHS Foundation Trust

Board of Directors

Meeting   Report

Subject: **Six Month Nurse Staffing and Estabishment Report**

Date: **Thursday 27th November 2014**

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Lead Director: **Susan Bowler – Executive Director of Nursing & Quality**

Executive Summary

The Trust Board have previously received extensive reports in relation to Nursing and Midwifery staffing at Sherwood Forest Hospitals. In January 2014, the Trust Board agreed to a nurse staffing investment of £4 Million to; significantly increase the overall numbers of Registered Nurses and create a 70/30% skill mix ratio. This case was approved with associated funding to implement and invest over a two year period. Planned Care and Surgery are moving nearer to the new skill mix. Additional Registered Nurse numbers on nights have been sustained since July 2013.

The Trust has set up a mechanism to ensure compliance with NQB guidance for reporting nursing and midwifery staff numbers through to the Board of Directors and to make the information available for the public on the Trust web site. The UNIFY data and ward rosters demonstrate shift by shift staffing levels have been predominantly met but matrons do have to work consistently to assess and mitigate potential risks. There has been a higher use of HCA's, particularly during the night to maintain safety of our patients in geographically challenging environments. We do monitor and record our nursing shift numbers at least 3 times a day. The Director of Nursing is aware of daily numbers.

There has been successful recuitment to midwifery and paediatric nursing over the last six months. The number of vacancies has also reduced across the Trust with a great deal of recruitment activity undertaken, particulary in relation to overseas nursing and newly qualified recuits. We have proactively implemented support mechanisms and listened to our recuits to ensure we implement retention strategies.

The 'Safer Nursing Care Tool' (formerly - The Association of UK University Hospitals, AUKUH) is a nationally developed and validated acuity / dependency tool specifically designed to measure nursing work load and estimate staffing requirements. The tool is widely used across the NHS and is accepted as 'the' standard means of assessing and monitoring ward/unit staffing levels. We had 97% data compliance across our wards in July 2014. Acuity levels are similar to those previously reported. This data demonstrates we do care for frail, poorly patients within our wards (level 1B).

There are some wards that provide staffing challenges. The Trust is aware of these areas and is proactively monitoring and supporting these areas through the use of agency and bank staff, as well as moving our own staff around.

Recommendation

The Board of Directors are asked to note the information contained in this summary report and the work undertaken to maintain safe staffing levels and move toward the Keogh investment.

Relevant Strategic Objectives (please mark in bold)	
Achieve the best patient experience	Achieve financial sustainability
Improve patient safety and provide high quality care	Build successful relationships with external organisations and regulators
Attract, develop and motivate effective teams	

Links to the BAF and Corporate Risk Register	BAF 1.3, 2.1, 2.2 2.3, 5.3, 5.5 Mortality on corporate risk register
Details of additional risks associated with this paper *(may include CQC Essential Standards, NHSLA, NHS Constitution)*	Failure to meet the Monitor regulatory requirements for governance- remain in significant breach. Risk of being assessed as non-compliant against the CQC Essential standards of Quality and Safety
Links to NHS Constitution	Principle 2, 3, 4 & 7
Financial Implications/Impact	Potential contractual penalties for failure to deliver the quality schedule
Legal Implications/Impact	Reputational implications of delivering sub-standard safety and care
Partnership working & Public Engagement Implications/Impact	This paper will be shared with the CCG Performance and Quality Group.
Committees/groups where this item has been presented before	Nurse staffing and workforce is discussed at OD & Workforce, Nursing Workforce Forum and TMB
Monitoring and Review	Monitoring via the quality contract, CCG Performance and Quality Committee & internal processes
Is a QIA required/been completed? If yes provide brief details	No