

TRUST BOARD MEETING

Report to:	Trust Board Meeting “in private”	Agenda item:	14
Date of Meeting:	18 th December 2014		
Title of Report:	Exception Report for Expected and Actual Staffing for Nursing, Midwifery and Care Staffing (Ward Areas)		
Status of report: (decision and approval, position statement, information, confidential discussion)	Information		
Lead Executive Director:	Michelle Clarke, Director of Nursing & Quality		
Author:	Michelle Clarke, Director of Nursing & Quality		
Appendices:	Appendix A - Fill Rate Indicator Return Staffing: Nursing, midwifery and care staff – November 2014 Appendix B – Nurse Sensitive Indicators 2014-15		
1. Purpose of the report			
To inform the Trust Board of the ward areas that didn't meet the expected staffing requirements in November 2014.			
2. Recommendations			
The Board are asked to note the content of the report.			
3. Summary of Key Issues for discussion			
<p>There are a number of shifts where there has been an overfill of additional staff. This is due to patients requiring high dependency care (patients at risk of falls, dementia etc.) as well as patients requiring non-invasive ventilation care on AAU.</p> <p>Fill rates have been low in some areas the lowest being Leominster Community Hospital at 75% for Registered Nurses during the day, but not to the extent of previous months, but have been supported by additional Health Care Assistants.</p> <p>Vacancies remain a challenge on medical wards at the County Hospital, but due to the patients requiring additional care this does not necessarily reflect in the fill rates. Lugg, Arrow and AAU have the highest number of vacancies, between 5 and 9 WTE for RGN.</p> <p>Attached for the first time this month are the Nurse Sensitive Indicators (NSI's) to show the Board the correlation, or at times non-correlation, between fill rates and NSI's. The NSI's have been fine-tuned over the past few months and for November have included additional lines of reporting such as Friends and Family response rate and score, and number of falls resulting in a serious injury.</p> <p>There have been no falls resulting in a serious injury across the Trust in November. Lugg has had the highest number of falls. The Head of Nursing has presented to Quality Committee in relation to this. More feedback will be given at Board. A review has taken place in relation to Lugg and the number of vacancies that will start to have an impact towards the end of January. This has involved the Head of Nursing, Director of Nursing & Quality and Director of Human Resources, as well as Executive Team discussion. A further review has taken place on staffing and an additional Band 6 is going to be recruited (the complexity of the patients and size of Ward warrants this). The new additional Band 6 monies has come from the Band 5 monies as we are never able to get to full establishment. This is already out to advert.</p>			

As an interim we are looking for additional agency nurses block booked and at the time of writing it appears we will have 2 Band 5's for a period of 3 months. We will be anticipating using some of the professional development nursing team to support working there. In addition the Head of Nursing and Director of Nursing & Quality have also worked there clinically to review in the past fortnight.

Due to a lot of new investments, e.g. increase in Emergency Department staffing, CAU and Frailty Unit there is a lot of internal movement which is having an impact on some of these Ward areas. The decision has been made to put in place an internal transfer window twice a year to reduce the fragility of some areas. This is not possible to instigate on Lugg at present due to the fact that formal offers have already been made.

4. Reference to previous reports

June/July/August/September/October/November 2014 Exception Report for Expected and Actual Staffing for Nursing, Midwifery and Care Staffing

5. For further information or any enquires relating to this report please contact:

Michelle Clarke, Director of Nursing & Quality, michelle.clarke@wvt.nhs.uk

6. Please confirm, by ticking the box, that you have included or considered the following items in developing your report:

Background

Care Quality Commission Implications

Legal / NHS Constitution considerations

Analysis of Risk including link to the Board Assurance Framework and Risk Register

Resource Implications (staffing & financial)

Patient, Public and Stakeholder involvement