

Report to:	Trust Board Meeting held "in public"	Agenda item:	12
Date of Meeting:	30 July 2015		
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		
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Appendices:	Appendix A - Fill Rate Indicator Return Staffing: Nursing, midwifery and care staff –June 2015 Appendix B – Nurse Sensitive Indicators June 2015		

1. Purpose of the report

To inform the Trust Board of the ward areas that didn't meet the expected staffing requirements in June 2015.

2. Recommendations

The Trust Board are asked to note the content of the report.

3. Summary of Key Issues for discussion

There are a number of shifts where there has been an overfill of additional staff, largely due to patients requiring one to one care.

In addition there has been overfilling of HCAs in some areas. This was to cover the shortfall in RGNs in those areas. AAU had a HCA overfill rate of 147.3% on nights. This was due to an increased need for high dependency care largely due to confused patients.

Fill rates have been below 90% in some areas, (Lugg, Hillside, Wye and Leominster). The majority of these were due to vacancies and sickness rates and the inability to provide bank and agency back fill. Although Hillside remains low it has significantly improved from last month. Leominster reported the lowest fill rate of 60%. On further investigation it transpires that they have two staff on maternity leave and two on sick leave along with 2.13 WTE vacancies. They have just completed a successful recruitment campaign and will have a number of new staff starting over the next few months.

Nurse sensitive Indicators (NSI)

The majority of the indicators are green reporting zero incidents or showing a decrease in incidences. The report also shows an overall decrease in slips, trips and falls. It is also worth noting that the Trust is now one of only 7 hospitals in England that has been MRSA free for 872 days.

Pressure Ulcers

The incidence of level 3 and 4 pressure ulcers remains extremely low with only one reported incidence this month on Leadon ward.

Slips Trips and Falls.

The majority of wards in the inpatient areas have seen a reduction in the number of reported falls with the overall reported incidences down on last month. It is important to note that although the Community Hospitals have seen a reduction from last month they are still showing a high level of falls. This is reflective of the high risk patient cohorts nursed in these areas.

Each Community Hospital continues to ensure patient assessments are undertaken correctly and action plans put in place including ongoing staff awareness in relation to falls prevention, use of falls sensors, high risk patients moved to beds visible from nurses' station along with ongoing intentional rounding. Hillside reported the highest number of falls (8). Three of the falls at Hillside were attributed to the same patient, who suffered from dementia. All preventive measures were in place to prevent their falls including one to one nursing.

In patient medical wards have seen a slight increase in slips, trips and falls. Again these areas are raising awareness of falls assessment and management with their clinical staff. The Trust is also reviewing the falls documentation and planning on trialling a new falls careplan. On a positive note since the introduction of the Physiotherapist assistant on Lugg ward, they have seen a significant reduction in the number of reported falls. This trial is now being evaluated with the intention of rolling it out across medicine ward.

In elective care slips, trips and falls reported incidents overall are the same as last month. Leadon has seen a reduction from last month. Monnow have shown an increase in the number of reported falls (3), one of which resulted in a SIRI. The patient in question tripped over and fell on to the bin then to the floor. They stated that they had not put their slippers on properly. The fall resulted in a fractured neck of femur (SIRI in process of being completed); a falls assessment had been completed.

Drug Errors

There has been a slight increase in reported drug errors on the previous month. Inpatient medical wards total number of drug errors decreased by two this month with Arrow showing a significant reduction in errors. However Lugg ward saw an increase of four reported errors. These are currently being investigated and all staff involved have been requested to write a reflective practice log and the matrix will not be signed off until the reflective practice is complete and returned to EDC. Drug errors on Frome ward remain high. Two were missed doses.

The community hospitals have also seen an overall reduction in the number of drug errors. The elective inpatient wards have seen an increase in drug errors with Leadon reporting four errors for the month. Three of these incidents related to delays in medication administration. Nurse's reflection has been completed.

Both the Children's wards and Maternity reported two drug errors each this month. The Maternity incidents were in relation to a verbal prescription order not being written up and also a missing drug kardex resulted in a patient not receiving Entonox for a period of time. Both of these incidents are under investigation.

None of the drug errors for this month resulted in any patient harm. All Staff involved in drug errors are required to complete a reflective practice log.

Infection Control

There has been a slight decrease in the number of reported C Difficile (3) compared to previous months, with the majority of wards reporting no cases. However of the 3 cases identified, only was EIA positive and required investigation. The investigation found there were no lapses in care.

Friends and Family test

There has been a significant increase in the response rate to the Friends and Family test which puts us in the green percentile in the majority of areas. Both Arrow and Redbrook had a poor a response with only 88% and 83% of service users recommending them respectively. Over 96% of respondents would recommend us to their friends and family.

Quality Committee

The Director of Nursing & Quality gave an update in relation to the Band 4 HCA workforce. Four band 4 HCAs have commenced employment on Wye and Redbrook wards .An additional 20 Band 4 HCAs are planned for September and 12 for November. This is part of a staffing review with individual ward areas.

The Director of Nursing & Quality informed the committee that Bromyard has had a quality impact assessment undertaken in relation to staffing which has resulted in a standard operating procedure being put in place to ensure high dependency patients have not been placed in the hospital along with a temporary reduction of the bed base by 4 beds to support staffing requirements .

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

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5. 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)



Adult and Child Safeguarding



Patient, Public and Stakeholder involvement