

Report to:	Trust Board Meeting "in public"	Agenda item:	9
Date of Meeting:	4 February 2016		
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:	Denise Price , Director of Nursing & Quality		
Author:	Paul Hooton, Deputy Director of Nursing		
Appendices:	Appendix A - Fill Rate Indicator Return Staffing: Nursing, midwifery and care staff –November 2015 Appendix B – Nurse Sensitive Indicators November 2015		

1. Purpose of the report

To inform the Trust Board of the ward areas that did not meet the expected staffing requirements in November 2015. This relates to Board Assurance Risk Number 417. Risk to recruitment of new staff and retaining current staff.

2. Recommendations

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

3. Summary of Key Issues for discussion

The majority of shift fill rates are over 90%. There continues to be a proportion of fill rates that are over 100% with a near equal split between Registered General Nurses (RGN) and Health Care Assistant (HCA) staff. However this has slightly reduced from last month. A number of these shifts can be accounted for through use of "specials" to support high dependency patients. Some wards (Lugg, Acute Admissions Unit (AAU) and Hillside) struggled to fill RGN shifts this month and increased their number of HCA's to support the nursing workload. The Deputy Director Of Nursing (DDON) and the Head Of Nursing (HON) have reviewed the fill rates and agency use for the month of October and produce a plan to manage this more effectively which includes minimal staffing numbers and a robust escalation process

Fill rates in some clinical areas for registered staff have been below 90%. This is slightly down on last month (11 occasions last month and 9 occasions this month). This is mainly due to vacancies and high sickness rates and inability to provide bank and agency back fill. Wye ward and Hillside Community Hospital reported a fill rate below 80% mainly due to unfilled agency shifts.

The Trust continues to have a high band 5 vacancy rate. This has resulted in a very high agency usage, particularly in December. However the Trust does have a robust recruitment and retention plan and we are beginning to see the benefits of that. Over the next 3 months we expect to half our current vacancy rate.

Nurse sensitive Indicators (NSI)

This month's NSI's have seen a decrease in drug errors and complaints with no change pressure ulcers and also a slight increase in family and friends test recommendations, however there has been an increase in the number of slips trips and falls and missed drug dose across the Trust. It is important to note that these increases are a back drop of the high use of agency thus far this year and also a very busy period of high levels of activity in the Emergency Department and high bed occupancy. The Trust continues to be MRSA free.

Pressure Ulcers

There have been 3 reported incidences of level 3 and 4 pressure ulcers this month 1 on Lugg Hillside and Teme respectively. All are currently under investigation. The incidence of pressure ulcers is increasing over the past 2 months. The Trust has recently employed a new lead nurse for Tissue Viability. One of his first tasks will be to review our training and processes in place for pressure care in the Trust.

Slips Trips and Falls.

There has been an increase in the number of slips, trips and falls (+9) across the Trust this month with Lugg and Frome wards showing the largest increases (+13 and +12 respectively). This is due to the number of high dependency patients (HDP) over the over past few weeks. One incident in Lugg ward and 1 on Redbook ward resulted in harm. A serious incident review is currently underway. A number of locations have decreased in the number of falls reported, particularly in Elective Care.

The Community Hospitals also continue to have a high rate of falls although Ross and Bromyard and Hillside show a slight decrease over the month.

Following a review of slips, trips and falls by the HON for Urgent Care, a comprehensive action plan is being developed. This will be implemented over the next month.

Drug Errors

There has been a decrease in reported drug errors (-6) on the previous month. The majority of inpatient areas are green or amber with only Wye ward showing red with 3 drug errors. All drug errors have been investigated and all staff involved has been requested to write a reflective practice log. A review of all the reflective accounts has taken place which confirmed that all staff involved in drug errors in December have completed their reflective accounts. None of the drug errors resulted in significant harm to the patients involved.

Missed Medication Incidents

There were 9 incidents attributable to nursing in December. These were spread out across the inpatient areas. Frome ward had 3 missed doses whilst Elective care wards had one each across their wards. Maternity also had 1 missed dose. On reviewing the drug charts most were due to drug charts that had not been completed properly. All have been investigated and action plans put in place. None of the missed doses resulted in significant harm to the patients involved.

Infection Control

There has been 1 reportable clostridium difficult case in December in Bromyard Community Hospital.

Friends and Family test

The majority of clinical areas are in the green percentile in the response rate to the Friends and Family test. However there has been a slight reduction in the number of respondents that would recommend the Trust to family and friends has improved slight to 96.4%. The response rate has improved in most areas; however Children's ward continues to be low with a 13.8% response rate along with Frome ward 16.9%. Arrow ward has showed a low recommendation status for the 2nd month in a row. These low performing results will be discussed with each clinical area by the respective Head of Nursing and an action plan developed if required.

Complaints and Compliments

The Trust has seen a significant decrease in complaints with only 1 clinical complaint reported this month. This is currently under investigation. The Trust received 518 compliments this month which is an increase of 181 on last month.

4.

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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