

Chief Nurse's Nursing Report 6 November 2019

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Agenda Item No: 11.1

Trust Board Report

Meeting Date:	6 th November 2019
Title:	Chief Nursing Officer Report Comprising: Right staff, right place, right time, Nurse Education Faculty, excellence in care, patient experience, communication and research.
Executive Summary:	<p>Key updates in this report include:</p> <ul style="list-style-type: none"> • 119 offers have been made for the nursing clinical fellowship programme. 73 have or are awaiting their NMC decision letters and 15 are in post. • In September and October 2019, overall 69 nurses attended the Trust induction. In addition, 6 midwives, 5 specialist and research nurses and 17 Healthcare Assistants had also attended the Trust induction. • There was a decrease in the total registered nurse/ midwife vacancies from 219.51 to 202.2 wte in September, with 86.05 wte (71.05 allocated and 15.0 unallocated) registered nurse/midwife planned to commence in October 2019. • The number of unregistered staff vacancies has not significantly changed in month, however 20 wte new starters are planned for October 2019 and recruitment is going. • The number of other vacancies has increased in month from 5.85 to 15.0 wte and further work is ongoing with directorates, finance and HR to understand and address this increase. • In September 2019, the Trust won a Nursing Times Award for Best Workplace Learning and Development – over 1,500 Nursing Staff. • The Nursing System Framework completed milestone 4. Twenty-six out of thirty work streams had key objectives of which eighteen of these objectives have been fully met. • Falls, MRSA, <i>C. difficile</i> and pressure ulcers are reduced. • Complaints have risen to 19 from 14 in August.
Action Requested:	Receive and note.
For the attention of the Board	As below
Assure	<ul style="list-style-type: none"> • Reducing nursing staff vacancies and focusing on improving their retention remains one of the key priorities. • There has been a reduction in falls (for the 6th consecutive month) and pressure ulcers.
Advise	<ul style="list-style-type: none"> • Focused efforts have continued to recruit and retain the nursing, midwifery and health visiting workforce at the Trust. Please see more details in the summary above and main body of the report.
Alert	<ul style="list-style-type: none"> • In September 2019 there were 26 RN/RM and 17 unregistered staff leavers, which represent a decrease on the RN/RM leavers and an increase on the unregistered staff leavers when compared with August's data.
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Links to Trust Strategic Objectives	<ol style="list-style-type: none"> 1. Create a culture of compassion, safety and quality 2. Proactively seek opportunities to develop our services 3. To have an effective and well integrated local health and care system that

	operates efficiently 4. Attract, retain and develop our staff, and improve employee engagement 5. Maintain financial health – Appropriate investment to patient services 6. Be in the top 25% of all key performance indicators
Resource Implications:	None
Report Data Caveats	This is a standard report using the previous month's data. It may be subject to cleansing and revision.
CQC Domains	Safe: patients, staff and the public are protected from abuse and avoidable harm. Effective: care, treatment and support achieves good outcomes, helping people maintain quality of life and is based on the best available evidence. Caring: Staff involve and treat everyone with compassion, kindness, dignity and respect. Responsive: services are organised so that they meet people's needs. Well-led: the leadership, management and governance of the organisation make sure it's providing high-quality care that's based around individual needs, that it encourages learning and innovation, and that it promotes an open and fair culture.
Equality and Diversity Impact	No negative impact.
Risks: BAF/ TRR	TRR 3644 - currently amber risk (9)
Risk: Appetite	Funding has been provided to improve quality and workforce.
Public or Private:	Public
Other formal bodies involved:	QGAC Policy Group Senior Nursing, Midwifery and Health Visiting Strategic Group
References	Safer staffing and national quality requirements.
NHS Constitution:	In determining this matter, the Board should have regard to the Core principles contained in the Constitution of: <ul style="list-style-type: none"> • High standards of excellence and professionalism • Service user preferences • Cross community working • Best Value • Accountability through local influence and scrutiny

Report Details

Nursing Quality Dashboard

The Nursing Quality Dashboard (Appendix 1) has been developed to provide an 'at a glance' view of ward/department/service performance with regards to structure, process and outcomes. The metrics contained within the dashboard are existing metrics that are reported on monthly and have been collated into one document to provide an overview. Appendix 1 should be referred to see areas included in the dashboard. Key points from this month's report are highlighted below.

Key points from September 2019 Dashboard	Action/Mitigation
Mandatory training has remained static	
Late observations continues to be challenging at 23.4%	An action plan is being developed by Division 1 and 2. 3 wards do particularly well and other areas are learning from them.
A further fall in FFT response rates in this group,	In the broader trust data there is less variation, however a range of actions is being undertaken aimed at increasing uptake by the patient Experience Team including targeted support for areas with lowest rates of response.
A reduction in pressure ulcers	Further action is being taken in community acquired PU.
A further drop in falls numbers	A number of CQI projects have reduced falls further.
<i>Clostridium difficile</i> and MRSA are reduced	Actions are in place and monitored following a previous re in both organisms.
An increase in the number of complaints in month	Individual areas are responding as required. Increase is in month and the trend is reducing compared to earlier this year.

Right Staff, Right Place, Right Time

Nursing, Midwifery and Health Visiting

Work is ongoing with the workforce department in Human Resources to create a monthly establishment report which includes all areas of nursing, midwifery and health visiting across the Trust. The establishment report is based on data obtained from ESR and finance which provides a much more complete and up to date data. It is divided into three sections registered nurse/midwife, unregistered and others which include ward assistants ward hostess and ward receptionists.

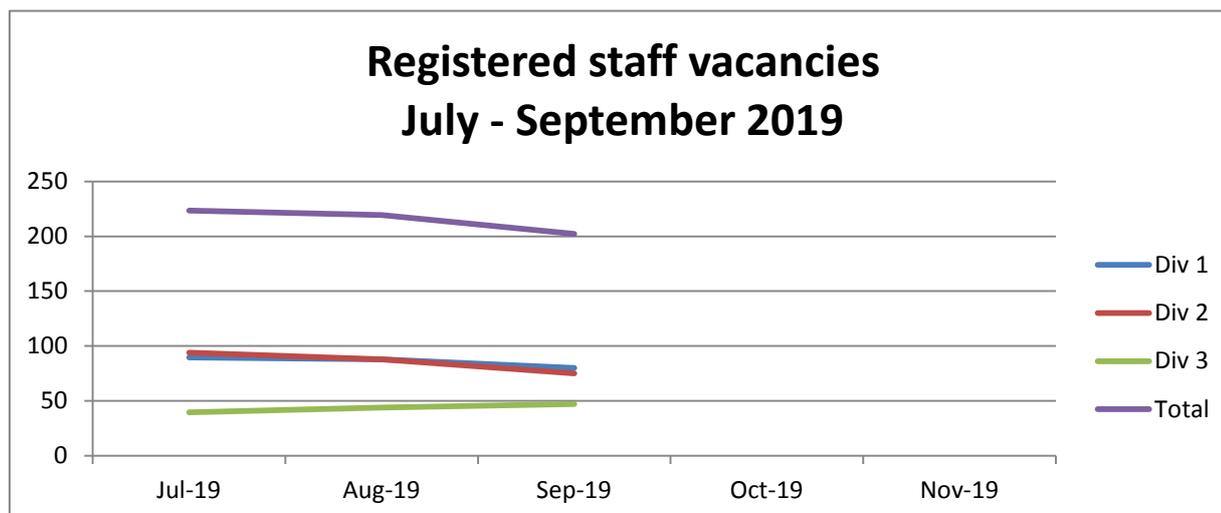
The table below provides the breakdown of vacancies by Division and staff group at the end of September 2019:

	Division 1	Division 2	Division 3	Total
Registered wte	80.08	75.08	47.04	202.2
Unregistered wte	25.16	31.82	3.42	60.4
Other wte	8.25	4.8	1.95	15
Total wte	113.49	111.71	52.41	277.61

The number of unregistered staff vacancies has not significantly changed in month, however 20 wte new starters are planned for October 2019 and recruitment is going. The number of other vacancies has increased in month from 5.85 to 15.0 wte and further work is ongoing with directorates, finance and HR

to understand and address this increase.

Graph 1 below illustrates the trend by month for registered staff.



This graph is showing a decrease in the total registered nurse/ midwife vacancies from 219.51 to 202.2 wte in September, with 86.05 wte (71.05 allocated and 15.0 unallocated) registered nurse/midwife planned to commence in October 2019.

The hot spot areas for registered nurse/midwife vacancies include:

- Division 1 – ICCU, A23, A5 and A6
- Division 2 – C15, C16, Deanesly, C24, C25 and C19

Actions

Recruitment of an additional 30 registered nurses from the Philippines has been completed and they should be arriving in the Trust over the next few months. They will then attend OSCE bootcamp before completing their OSCE exam and registering with the NMC. Weekly interviews are being held to recruit to the International Clinical Fellowship Programme and they will join the OSCE bootcamp with the nurses from the Philippines.

Individual wards are also continuing with local recruitment for registered nurses/midwives.

Generic health care assistant recruitment is ongoing with interviews occurring regularly.

Leavers

In September 2019 there were 26 RN/RM and 17 unregistered staff leavers, which represents a decrease on the RN/RM leavers and an increase on the unregistered staff leavers when compared with August's data.

Clinical Nursing Fellowship Programme

In September 2019, the Trust won the Nursing Times Award for Best Workplace Learning and Development – over 1,500 Nursing Staff.

Clinical Fellowship Data (as at 20th September 2019)

119 offers have been made for the nursing clinical fellowship programme. 73 have or are awaiting their NMC decision letters and 15 are in post. The internal applicants have commenced their pathway the first week of October 2019 and the Trust has requested for the university to schedule a module for semester

3 of the BSc top-up to ensure that the students do not have to complete 2 modules in one semester. Once this has been confirmed, each student will be emailed with their individual module pathway for both the MSc and BSc routes.

11 nurse fellows have started in post at the end of September 2019.

International Recruitment

The next Philippines overseas cohort have arrived week commencing 7th October 2019 and OSCE bootcamp commenced on the week beginning 14th October 2019.

The OSCE bootcamp continues to evolve and there will a further new patient and a new skill of urinalysis introduced from Monday 28th October 2019.

The new style OSCE recommended by the NMC has been postponed until June 2020, which will allow the Trust time to re-write the programme.

Induction attendance October 2019

There were 62 nurses and 6 midwives on Trust Induction in October, including 25 newly qualified nurses and 2 research nurses, there were also 5 midwives. In addition 10 healthcare assistants, 1 occupational therapist, 1 sonographer, 1 bank nurse and 1 theatre practitioner attended. This is the highest attendance for nurses this year.

Nursing System Framework

Below is the quarterly update on progress from the Nursing System Framework. In summary twenty-six out of thirty work streams had key objectives for milestone four. Eighteen of these objectives have been met. Work streams that have not achieved these objectives have explained the challenges and have actions in place to achieve them.

Milestones	No.	Key Objective	Achievements	Was it achieved YES/NO	Actions taken if milestone not met
Right Staff in the right place at the right time	1	Recruit a further 100 nurses per quarter. Maintaining a vacancy gap < 5%.	International recruitment - 60 conditional offers made to registered nurses in Philippines - 20 have arrived in country and completing OSCE boot camp. International clinical nurse fellowship programme 60 conditional offers made but majority need to complete ILETS and CBT before allowed to enter country 40 Newly qualified registered nurses recruited. Vacancy report has been revised with HR and new report captures all vacancy data based on budgeted establishments in ESR, therefore comparing of vacancy figures before with now is not comparable	NO	
	3	Increase the number of trainee Advance Practitioners by a further 10	Funding for 13 additional ACP requested from HEE and approved however only 9 places taken up by the directorates	NO	Requests have been sent to Matrons asking them to start thinking about what requirements they will need for next academic year
	4	Review data gathered via the Safe care module	Safe care rolled out to 30 wards, average compliance with data input is 41% so unable to utilise reports from safe care at this time - need to have a better data input compliance	YES	
	5	Operationalise winter preparedness plans to optimise workforce	Trust has decided there is no requirement to plan to open winter additional bedded capacity	YES	
	6	Defined and reviewed nurse leadership structures into business cases	Achieved across all divisions	YES	
Team Structure	7	Implement amendments to nurse recognition programme	Data base commenced in Milestone 1 Governance team - reviewed and Collated further by V CARTER Research Nurse/ detail added for reference. Communicated in Sept 19 Professional Forum recognition	YES	Continue to develop, roll out - Web site needs to be re-designed and

					launched via appropriate comms
The Education Faculty	10	Commence additional developmental programmes to support staff succession planning	Band 5 and band 6 programmes developed and ready to deliver. Both cohorts are fully booked	YES	
	11	Commence overseas fellowship programme	International clinical fellowship programme established with conditional offers and recruits from Nigeria in country completing OSCE	YES	
	12	Implement one programme for local accreditation	Meetings have taken place with Universities to scope potential	NO	
	13	Increase nursing numbers studying at level 7 (n=25)	60 internal applicants for Clinical Nurse fellowships	YES	
	14	Agree and purchase competency package	Package identified. Project plan being developed. Licence to be reviewed.	YES	
Excellence in Practice	15	Develop auto reporting via Health Assure to demonstrate improving NSI's	Baselines identified Nurse sensitive indicators and dashboard continued and, presented monthly with commentary as part of CNO report to Board Work ongoing with Health Assure to develop automated dashboard.	YES	Regular meetings commence with timescales to develop automated dashboard.
	17	Review of Safeguard intercollegiate statutory guidance and update all policies.	Intercollegiate Document re training is being reviewed on a 6 monthly basis. (April and November). Meetings in progress. Adult training is monitored and compliance is on an upward trend. 95% target for March 2020. Staff groups will be reviewed at next planned meeting. Key policies also being reviewed on a monthly basis.	YES	
	18	Following the scoping of content of environmental audits implement any recommendations from scoping exercise	Content updated as required following the scoping.	YES	
	19 /19a	50% of patients discharged with catheters have a catheter plan. MRSA screening in portals 95% compliant.	July 2019 DRHABs = 3 August 2019 DRHABs = 6 September 2019 DRHABs = 4 A catheter project has commenced but results are not available as yet July MRSA Screening Elective 80% Emergency 78% Acquisition = 7 August MRSA Screening Elective 82% Emergency 77% Acquisition = 8 No compliance data available as yet September Acquisition = 2	NO	Catheter project in progress on A7 and C15. Timer tag project in progress on A8
	20	Embed NSI's for EoL care	For community - EOL care scoped with in transformation of services. Next steps, establishing pathways with single point of access. Next steps, rolling out process to staff once SPOA is established.	YES	
	21	Increase booked mothers onto the continuity of carer pathway by 20%	(September 2019) National Maternity Review (2016) Better Births - Improving outcomes of maternity services in England. NHS England	YES	
	22	Re-audit moisture lesions documentation to ensure 100% compliance against documentation	A focus on continence care and documentation is planned for October. Documentation audit date to be agreed before the next quarterly report. Action plan to be agreed with commissioners in October.	NO	Moisture lesions have been reported for 1 year. Numbers are reported monthly and have been steadily rising due to improved reporting.
	23	Reduction of avoidable falls with serious harm by 25%	Overall all falls reduced by 9.26% Falls with Serious harm reduced by 50% Revised falls policy in draft	YES	
	24	Increase FFT inpatient recommendations by 2% and ED recommendations by 4%	Revised baselines have been agreed to measure improvement. • A review of the FFT toolkit has been undertaken. It now provides more narrative pertaining to the data in order to support improvement in individual wards/departments. Those identified areas where a decrease in response/recommendation rate has been noted are required to complete an action plan. Non-compliance will be escalated to the relevant Matron/Head of Nursing. All actions received by the Patient Experience Team will be recorded on a newly devised action log and monitored accordingly. The distribution list for the monthly FFT reports has	NO	Please refer to the achievements tab for details of actions taken and those in progress.

			<p>also been widened to include the divisional governance leads and group managers.</p> <ul style="list-style-type: none"> • The Patient Experience Team delivered a FFT focussed presentation at the Professional Nursing, Midwifery and Health Visiting Forum meeting in September 2019. • Focussed work has been undertaken within maternity and discussions taken place between the Trust and the FFT provider to finalise the process for extracting information from Badgernet and transferring it across to Healthcare Communications to facilitate the electronic survey of patients in all four touchpoints. This will then allow for the existing paper-based service to be replaced with the SMS service. Once established, it is hoped that this will assist in increasing the Trust's overall response and recommendation rates. Early trials have been successful and the next quarter's report will show results gained electronically. • In terms of the Emergency Department, the department is planning to review the themes of complaint and PALS concerns raised to identify any correlation with the comments received from FFT. In addition, the management team will discuss ways in which to increase the FFT participation rate in their departmental governance meetings and continue to raise awareness amongst staff and patients. • From April 2020, there will be a number of changes to the FFT nationally and supporting implementation guidance has been shared with providers for implementation. The Patient Experience Team is already liaising with our FFT provider to implement these changes. 		
	25	Increase number of Shared Governance Councils by one	Facilitator appointed Training days booked for two councils. Discussions taking place with more areas. New name identified. System for developing councils simplified. Training shortened to one day	YES	
Research & Technology	26	1 new nurse led ethics approved project	One project (RTLs) is about to be submitted for ethics approval in Oct.	NO	Other projects are being progressed to ethics.
	27	One article publication and host research conference	Several articles published - captured through recognition database. V Carter facilitating with Governance team Multidisciplinary Research conference scheduled November 20th 2019. Several staff also presented at national /local conferences captured via recognition database.	YES	
	28	Agree key actions arisen from the baseline culture survey	Culture survey Pilot in wards A7, A8 and C22 (135 staff) have completed the census period (with a 79% response rate). Reports now received will be issued along with plans for dissemination of results and collaborative action planning with staff. Evaluation feedback will form part of a Pilot report being prepared for senior nurse leadership.	YES	
Comms Plan	30	Ensure the nursing newsletter, key nursing governance requirements and forums are triangulating communications for dissemination	Website updated Newsletters published on time and contains current topics in association with Communications Team.	YES	

Appendix 1 Nursing Quality Dashboard September 2019

RWT Executive Level Nursing Quality Dashboard																	
Data Period - End September 2019																	
Ward/Clinical Location	D I V	STRUCTURE				PROCESS			PATIENT VOICE			OUTCOME					
		Workforce - Nursing Whole Time Equivalents		In recruitment		Mandatory Training % - trend from last month	VTEAPAC Late Observations (%)	CMPDP	Response Rate (%)	Recommendations	Complaints	Pressure Ulcers (Data Reported)	Falls (Data)		Cardiac Arrests	C-AMI	MRSA Acquisitions
		Budget	Vacancies / Trend / % - Budget										Inc moderate harm	Serious harm			
Division 1																	
A5	1	39.4	4.8	↑	1.0	91.1	23.1	5.9	94	46							1
A6	1	39.5	6.2	↑	1.8	94.0	18.3	6.1	46	10	1	1					
Hilton Main	1	40.1	3.3	↓	2.0	97.9	7.5	6.2	58	81			1				
A8 - SFU	1	69.6	4.3	↑	1.0	91.8	13.7	7.2	29	65		1	3				1
A12	1	36.9	5.2	↑	0.0	90.8	20.6	6.0	23	8			1				1
A14	1	37.2	-1.3	↓	1.1	89.7	27.0	6.5	26	17	2						
(C39) Beynon SSU	1	27.4	4.4	↓	0.0	97.6	15.0	7.4	36	33	1		1				
A23	1	23.6	5.0	↓	1.0	91.9	17.1	7.3	13	7	1						1
B8 (CTW)	1	50.9	4.7	↓	4.0	96.7	15.4	6.5	35	46	1		1				6
B14	1	61.6	6.6	↓	2.9	95.4	8.2	7.1	37	31			2				
B15 (Card Day ward)	1	30.0	3.9	↓	0.0	94.5	29.9										1
Theatres	1	294.9	16.0	↓	7.0	95.5											
B9 (ICCU)	1	158.4	8.2	↓	7.0	94.0		30.6	0	0							
D7	1	34.4	0.5	↓	0.0	88.6	9.2	7.9	23	39		1	1				
D16 Delivery Suite	1	91.3	2.8	↓	1.0	88.2		7.4	13	51	1						
D10 Maternity Ward	1	46.3	1.6	↓	5.8	84.6											
D9 (Trans Care)	1	18.1	-3.3	↓	0.0	94.0			0	0							
NNU	1	91.2	13.9	↓	6.0	87.7		18.7	0	0		1					
Divisional TOTAL		1190.8	86.7	↓	41.6	92.4	16.9	9.3	28.9	28.9	7	4	9	0	10	3	0
Division 2																	
A7	2	39.7	2.2	↑	0.0	94.0	23.8	5.6	78	20	2		3				
A8	2	39.8	0.5	↓	1.0	93.1	23.0	6.3	16	5			10				
ASU	2	65.4	5.9	↓	5.0	92.6	29.1	6.3	100	62			1				
C22	2	35.6	2.4	↓	1.0	90.5	23.5	7.9	13	2			1				
Neuro Rehab	2	21.5	1.2	↓	0.0	91.6		9.1	0	0							
Ward 1	2	30.2	4.1	↓	4.0	97.2		6.2	100	16							
Ward 2	2	30.2	1.9	↓	0.1	93.8		5.5	18	4			1				
Falroak Ward	2	30.2	1.9	↓	0.9	100.0	9.7	4.7	61	22		1	3				
C15	2	28.9	5.0	↓	5.6	93.5	35.8	5.4	26	9	1	4	4				1
C16	2	35.3	3.6	↑	3.0	84.8	36.6	5.0	23	10	1		2				1
C17	2	28.2	2.1	↓	1.0	88.2	32.2	6.5	50	15			4				
C24	2	36.5	4.5	↓	8.0	89.9	34.5	4.2	16	5	1	3	3				1
C25	2	36.5	7.4	↓	1.0	83.9	38.7	5.1	17	5	1						1
C18	2	35.5	3.8	↓	2.0	89.9	18.3	5.5	21	11		2	1				
C19	2	35.3	4.9	↓	5.9	92.7	24.4	7.1	20	7							1
C35 - Deansley	2	29.5	9.8	↓	4.0	85.8	21.8	6.0	22	4		1					1
B11 (CHU)	2	45.2	4.9	↓	3.0	87.6	21.7	7.1	25	7			1				1
Durnall Unit	2	15.4	1.5	↓	0.0	86.9	5.5		12	42							
C41	2	47.3	3.9	↓	3.0	92.9	34.6	5.9	30	19		1	7				1
ED	2	151.8	13.5	↓	4.0	92.4			15	1152	3		1				1
(C58) AMU	2	85.9	4.9	↑	7.0	96.6	13.8	8.3	22	46	2		6				1
Divisional TOTAL		903.9	90.1	↑	59.5	91.3	25.1	6.2	32.6	69.7	11	13	49	0	7	4	2
Division 3																	
A21	3	91.3	16.7	↓	8.8	99.8		12.9	58	98	1						
Com Paeds- Gem Centre	3	30.8	2.3	↓	0.9	96.5			208	4							
Rheumatology	3	16.3	0.1	↑	0.0	96.9											
Dermatology (CCH&NX)	3	21.0	7.2	↑	1.0	95.5											
Radiology	3	5.4	-1.0	↑	0.0	98.3											
Sexual Health	3	35.4	0.4	↑	0.4	95.7											
Anticoag	3	13.7	0.7	↓	0.0	93.7											
CICT	3	24.4	2.4	↓	4.0	98.4											
Com Matrons	3	11.4	0.7	↑	0.0	93.4											
District Nursing	3	129.1	12.0	↑	5.6	93.5						19					
RIT	3	31.0	-1.3	↑	0.0	98.4											
Hospital at Home	3	13.9	1.6	↓	0.0	91.2											
Primary Care	3	94.0	3.7	↓	1.0	94.8											
Divisional TOTAL		517.7	45.4	↓	21.7	95.8	0.0	12.9	30.5	98	1	19	0	0	0	0	0
Total for Divisions 1, 2 & 3		2612.3	222.2		122.8	93.1	23.4	6.9	38.7	65.5	19.0	36	58	0	17	7	2
August data		2460.7	242.3		84.4	93.3	22.9	6.9	36.5	171.5	14.0	42	43	0	13	12	8

KEY	Budget	Total nursing and HCSW funded establishment for clinical location - Band 2-7		Not applicable			
	Total Vacancies	The total vacancies at the time of report = number recruited added with open vacancies	wte = whole time equivalents	Vacancies: trend arrow v. previous month: bar graph % over v. under recruited			
	No. recruited	All known appointments made through recruitment - these staff are not yet in post		0-3 wte	3-5 wte	>5 wte	Over Recruitment
	Vacancies Open	The number of positions which are awaiting appointment and not appointed to at interview		Not applicable			
	Mandatory Training	Percentage of all training mandatory requirements completed for each clinical location		>95%	90% - 95%	<90%	
	Late Observations	Percentage of patient observations not completed in time, against VitalPAC parameters		0% - 5%	5% - 10%	>10%	
	CHPPD	An equation for the cost of patient care per (total hours of care delivery/bed occupied)		>6	5-6	<5	
	FFT - Response Rate	Friends and Family Test - patient experience feedback by the volume of patient responses		>40%	20% - 40%	<20%	
	FFT - Recommendations	Friends and Family Test - from the patient response rates, how many would recommend care at RWT		>90%	80% - 90%	<80%	
	Complaints	Total number of complaint received for the clinical location/ward		0	Not applicable	≥1	
	Pressure Ulcers	Number of pressure injuries as reported on Datix (sample date - circa 10th day of new month)		0	Not applicable	≥1	
	Falls	Number of falls as reported on Datix (sample date - circa 10th day of new month)		0 - 1	2	≥3	
	C-diff	Number of clostridium difficile incidences (as reported by Infection Prevention)		0	Not applicable	≥1	
MRSA	Number of MRSA acquisitions per month (as reported by Infection Prevention)		0	Not applicable	≥1		

Not applicable