

Board Agenda

Board of Directors

Meeting, in Public, of

1 September 2014

Theatres Seminar Room, Leighton Hospital

9am

Board of Directors
A meeting will be held in Public at
9am on Monday, 1 September 2014
In the Theatre Seminar Room, Leighton Hospital

Agenda

Action Key	
A	Approval
I	Information
D	Decision /Discussion

Item No	Title of Item	Action	Delivered by
1.	Welcome and Apologies To welcome members of the public and attendees and to receive apologies for absence from Board Members. <i>Apologies</i> <ul style="list-style-type: none"> • Ruth McNeil, Non-Executive Director • Julie Smith, Director of Nursing & Quality 		All 09.00
2.	Patient/Staff Story	I	Deputy Director of Nursing & Quality 09.00
3.	Board Members' Interests To consider any <ul style="list-style-type: none"> • changes to Directors' interests since the last meeting. • conflicts of interest deriving from this agenda. 		All 09.10
4.	Minutes of the Last Meeting To approve the minutes of the Board of Directors meeting held in Public on Monday, 4 August 2014 <i>These papers will be published in line with the Trust's Publication Scheme, subject to approved redactions, within three weeks of the Board of Directors' meeting of 1 September 2014. The minutes are currently in draft form.</i>	A	All 09.11
5.	Actions Arising from Previous Minutes, not Included Elsewhere on the Agenda	I	All 09.15
6.	Annual Work Programme To note the programme	A	Chairman
7.	Chairman's Announcements To note a spoken report from the Chairman on items including: 7.1 Stakeholder Engagement	I	Chairman 09.25

Item No	Title of Item	Action	Delivered by
12.	Responsive		
	<p>12.1 Audit Committee To note the minutes of 11 August 2014 This paper will be published in line with the Trust's Publication Scheme, subject to approved redactions, within three weeks of the next scheduled Committee meeting. The minutes are currently in draft form.</p>	I/D	Mr David Hopewell 10.25
	<p>12.2 Performance & Finance Committee To note the minutes of the meeting of August 2014 This paper will be published in line with the Trust's Publication Scheme, subject to approved redactions, within three weeks of the next scheduled Committee meeting. The minutes are currently in draft form.</p>	I/D	Director of Finance 10.30
	<p>12.3 Performance Report To approve the report This paper will be published in line with the Trust's Publication Scheme, subject to approved redactions, within three weeks of the Board of Directors meeting of 1 September 2014</p>	I	Director of Finance 10.40
	<p>12.4 Replacement of Radiology Information System (RIS) To approve the Business Case This paper will not be published in full under the Trust's Publication Scheme due to exemptions under Section 43 of the Freedom of Information Act 2000 because such disclosure would be likely to prejudice the commercial interests of the Trust or of a Third Party.</p>	I/D/A	Director of Finance 10.55
	<p>12.5 Legal Advice To receive a verbal report</p>	I	Chief Executive 11.05
13.	Well-Led		
	<p>13.1 Visits of Accreditation, Inspection or Investigation To receive a spoken report</p>	I	Chief Executive 11.10
14.	Effective		
	<p>14.1 Strategic Integrated Governance Committee To note the minutes of the meeting of 11 August 2014 This paper will be published in line with the Trust's Publication Scheme, subject to approved redactions, within three weeks of the next scheduled Committee meeting. The minutes are currently in draft form.</p>	I/D	Medical Director 11.15
	<p>14.2 Use of the Trust Seal To note the request This paper will not be published in full under the Trust's Publication Scheme due to exemptions under Section 43 of the Freedom of Information Act 2000 because such disclosure would be likely to prejudice the commercial interests of the Trust or of a Third Party.</p>	I	Director of Finance 11.20

Item No	Title of Item	Action	Delivered by
15.	Board Actions To consider the latest schedule of Board actions outstanding.	I	All 11.25
16.	Any Other Business		All
17.	Time, Date and Place of Next Meeting To confirm that the next meeting of the Board of Directors will take place in public, in the Board Room at Leighton Hospital, at 9.30am on Monday, 6 October 2014		All 11.30

Monthly Nursing & Midwifery Staffing Report

**Board of Directors
1st September 2014**

(July 2014 data)

**Julie Smith
Director of Nursing & Quality**

1.0 Purpose and summary points

This report provides the Board of Directors with information on the details of the actual hours of Registered nurses/midwives and Health Care Assistant staff's time on ward day shifts and night shifts versus planned staffing levels for July 2014.

- NHS England expects that the Boards of NHS Trusts and Foundation Trusts receive monthly updates on workforce information and staffing capacity and capability.
- These updates, which are to be discussed at the Public Board meeting will also be available on the Trust internet site <http://mcht.nhs.uk/information-for-patients/why-choose-us/quality/safe-staffing-levels/>
- For each of the 22 clinical inpatient areas, the planned number of hours of nursing or midwifery staff time required for day shifts and night shifts has been calculated for the month and the actual fill rate has been recorded.
- Overall the fill rates were

	Day		Night	
	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)
July	97.8%	98.8%	98.6%	100%
June	97.6%	98.4%	97.3%	100.6%
May	98%	98.5%	100%	100%

- This report details those areas where there was a variance of actual fill rates and planned staffing hours. The reasons for the variance are given and any actions being taken are detailed.

2.0 Introduction

Mid Cheshire Hospitals takes staffing levels very seriously and have as a Board made this a priority for many years. The Trust was an early adopter of the Safer Nursing Care Acuity Tool and ensures the Board receives detailed staffing reports every six months.

In 2013, the National Quality Board produced a document entitled "How to ensure the right people, with the right skills, are in the right place at the right time – A guide to establishing nursing, midwifery and care staffing capacity and capability" which outlines ten expectations for NHS providers and commissioners in relation to nursing and midwifery staffing. Expectation 7 states that Boards receive monthly updates on workforce information and staffing capacity and capability. These updates which are to be discussed at the Public Board meeting, will also be available on the Trust's internet site.

Further guidance circulated by Jane Cummings, Chief Nursing Officer, NHS England, in May 2014 clarified that the Board of Directors will be advised of those wards where

staffing capacity and capability materially falls short of the plan, the reasons for the gap, the impact and actions being taken to address it. This can be presented as an exception report, providing the Trust website publishes ward by ward data on actual versus planned numbers of staff by registered nurse / midwife / care staff and day duty / night duty.

	Day		Night	
	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)
July	97.8%	98.8%	98.6%	100%
June	97.6%	98.4%	97.3%	100.60%
May	98%	98.5%	100%	100%

For some wards, there will be a difference between the planned and actual staffing hours. In some cases, departments will have used more hours than they planned to use and in other cases they will have used less hours than they planned. The reasons for using more staff hours than planned vary and may include needing to care for patients who are either more unwell or who have greater care needs than those patients usually cared for on that ward, or providing one to supervision and support to a patient.

The reasons for using less staff hours than planned could include using fewer beds than planned. For example if Critical Care is only 70% occupied they may decrease the number of staff needed. Alternatively, using less staff hours may be due to caring for patients who are less unwell or with fewer care needs than those patients usually cared for on that ward or unit.

The planned staffing level is based on the funded establishment as agreed and set by the Director of Nursing driven by the acuity results of the nationally recognised tools. When staffing levels are lower than the plan on a shift, the Trust has a clear process in place to ensure the staffing on that shift remains at a safe and appropriate level. This is clearly detailed in the escalation plan and the SBAR tool **S**ituation, **B**ackground, **A**ssessment, **R**ecommendation is used to record and communicate the situation. This allows for consistency of reporting and recording. The actions taken by staff are recorded and monitored.

The number of hours of actual staffing is a combination of the hours worked by permanent staff and those worked by temporary staff on a ward or department during that month. On occasions appropriately skilled staff are re-deployed from other areas or temporary staff will be included in the establishment to cover unforeseen leave or sickness / absence etc. These temporary staff are mostly supplied by the Nurse Bank run from within the organisation. This ensures the staff used are familiar with the organisation, its standards and policies and are trained to the level required by the Trust.

3.0 Data Collection

The data is being collected using an online visual system that is a mirror of the staffing boards on display in all wards. It is accessible to all staff on the Trust

intranet, allowing data to be collected in real time. This is a complex process with a significant amount of data inputted by a large number of clinical staff at ward and department level. Data checks have been undertaken and these will continue as the system becomes more embedded.

4.0 Understanding the data by ward and department

The Trust website lists the results for all the inpatient wards or departments and details whether there was a deficit or surplus between the planned and actual staffing hours by day and night. The tables below show a summary of this data for July 2014.

Ward Name		Qualified	Unqualified	Qualified	Unqualified
		Fill Rate	Fill Rate	Fill Rate	Fill Rate
MCHFT	Jul-14	97.8%	98.8%	98.6%	100%
AMU	Medical Admissions	98.5%	98.4%	100%	100%
CAU (Summer)	Paediatrics	100%	100%	100%	100%
Critical Care	Critical Care & High Dependency	100%	100%	100%	N/A
Elmhurst	Intermediate Care	100%	103.8%	100%	101.6%
Ward 1	Cardiology	97.7%	107.5%	96.0%	100%
Ward 10 SAU	Surgical Admissions Unit	98%	100%	101.6%	103.2%
Ward 10	General Surgery	97.7%	99.2%	100%	100%
Ward 12	General Surgery	92.9%	101.1%	100%	98.4%
Ward 13	General Surgery	98.3%	97.6%	98.9%	100%
Ward 14	General Medicine	100.3%	99.0%	100%	100%
Ward 15	Trauma & Orthopaedics	95.7%	95.6%	100%	98.9%
Ward 18	General Medicine	109.8%	86.7%	100%	100%
Ward 2	General Medicine	93.1%	98.8%	104.8%	98.9%
Ward 21b	Rehabilitation	96.5%	100%	100%	101.6%
Ward 23	Antenatal and postnatal	99.5%	96.0%	100%	100%
Ward 24	NICU	100%	100%	100.0%	100%
Ward 26	Labour Ward	100%	100%	100.0%	100%
Ward 4	Gastroenterology	99.6%	98.0%	98.4%	100%
Ward 5	Respiratory	90.3%	98.0%	91.1%	100%
Ward 6	Stroke	94.5%	104.5%	89.5%	101.6%
Ward 7	Gastroenterology	98.6%	95.2%	100%	97.8%
Ward 9	Elective Orthopaedics	92.7%	94.6%	100%	N/A

The two top reasons recorded for not meeting the plan during July were:

1. Vacant post
2. Sickness

On all occasions when the plan was not met, a review of the patients' needs were assessed by the ward manager and/or matron and if necessary, this resulted in actions taken to support the ward. This may have resulted in a skill mix change to the plan or moving a member of staff from another area.

5.0 Conclusion

The Board of Directors is asked to NOTE this report.

Actions from the Minutes of Board of Director Meetings

Recommendation

The Board is asked to approve the actions taken to date deriving from Board resolutions

01.09.2014

For Board of Directors	Item	Action	Lead	Raised	Date Completed	Notes
Oct-14	ENT Service Line Review	To receive a report on same	Denise Frodsham	Jul-14		
Nov-14	Project Management Office	To receive an update paper	David Pitt	Nov-13		
TBA	Pascal Metrics	To receive a verbal update on the survey results	Tracy Bullock	Aug-14		