

Safe Staffing

Trust Board	Item: 10
Date 7th February 2018	Enclosure: F
Purpose of the Report: To propose and agree thresholds for trained nurse staffing on general wards at Kingston Hospital Foundation Trust.	
For: Information <input checked="" type="checkbox"/> Assurance <input type="checkbox"/> Discussion and input <input type="checkbox"/> Decision/approval <input checked="" type="checkbox"/>	
Sponsor (Executive Lead):	Sally Brittain Director of Nursing and Quality
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Risk Implications – Link to Assurance Framework or Corporate Risk Register:	Corporate objective 5.
Legal / Regulatory / Reputation Implications:	National Safe Staffing reporting requirements
Link to Relevant CQC Domain: Safe <input checked="" type="checkbox"/> Effective <input checked="" type="checkbox"/> Caring <input type="checkbox"/> Responsive <input type="checkbox"/> Well Led <input checked="" type="checkbox"/>	
Link to Relevant Corporate Objective:	Strategic Objective 2 – To have a committed, skilled and highly engaged workforce who feel valued, supported and developed and who work together to care for our patients
Document Previously Considered By:	
Recommendations: a) Note and agree the proposed minimum number of trained nursing staff to each bed during the day and night on the general wards within Kingston Hospital FT. b) Note the process escalating and monitoring staffing levels in the maternity services.	

Safe Staffing Update February 2018

1. Introduction

- 1.1 The report presented to the Board in November 2017 provided information about vacancy, recruitment, retention and development of nursing, midwifery and care staff.
- 1.2 The report considered the need to balance the setting of safe staffing establishments within available resources and indicated how that would be achieved. It also provided assurance of the process in place to review and mitigate staffing shortfalls in real time and the process in place to ensure unmitigated staffing shortfalls are reported, investigated and lessons learnt.
- 1.3 Working on Royal College of Nursing Guidance and professional judgment, in the absence of recommendations on minimal staffing levels, the Board were asked to consider the proposal that wards should have a minimum of 1:8 trained nurse to bed ratio during the day, and 1:10 at night with a minimum of two trained nurses on duty at any one time on inpatient wards. The Trust Board requested time to consider this proposal.
- 1.4 While the Trust Board accepted that staffing was safe in the maternity unit as all vacancies were fully recruited to, it requested detail of how that safety was assessed and monitored and any concerns were escalated.

2. Maternity Staffing

In October 2017 the maternity service recruitment strategy was successful in recruiting to all vacant midwifery and support worker posts. Proactive recruitment continues to maintain a vacancy rate below 5%.

Midwifery, Nursing and support worker staffing is subject to daily review and benchmarked against the acuity of the women requiring care and the clinical demands in both the hospital and community settings. This is to ensure the needs of women and their babies are met safely. Midwifery care is supported by nursing staff and band 3 and band 4 Maternity Support Workers in both the hospital and community settings.

A maternity manager is on call 24/7 to provide senior support when assessing staffing requirements out of hours and robust escalation processes are in place both in the community and hospital settings which consider the potential variation in the risks and needs of women and babies on a continual basis. A Midwifery Unit Lead is in place 24 hours a day and liaises with the senior midwifery team during the day to ensure safe levels of staffing are maintained, if required the senior midwifery team support clinical care.

Safe staffing and the quality of care provided in the maternity services are closely monitored by the Director of Midwifery and Maternity Service Line through local risk and governance incident reporting processes.

A reduction in the number of deliveries at Kingston Hospital NHS Foundation Trust has improved the midwifery ratio to births from 1:31 to 1:28. A midwifery staffing ratio of 1:28 is in line with the recommendations from the Birthrate plus review (which was carried out in the Trust in 2016) to maintain safety and quality of maternity care. The forecast of expected births is monitored monthly by the maternity service line to predict clinical activity and support planning staffing levels.

Conclusion & Recommendations

The Trust Board is asked acknowledge the robust process in place to ensure the maternity services are safely staffed.

It is also asked to agree the proposed minimum ratio of 1:8 during the day and 1:10 at night with a minimum of two trained nurses on duty at any one time in the inpatient wards. These ratios will be monitored and reported to the Trust Board on a 6 monthly basis via the Safe Staffing Paper as an average ratio for the period however, occasions when the ratio has been breached will be reported numerically by day and night to ensure clarity and enhance safety. The Trust Board is reminded that these ratios are applicable to the general medical and surgical wards only and that areas of high acuity or specialism will have significantly higher trained nurse to bed ratios entirely appropriately.