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Date	10.11.22	Agenda item	Bo.11.22.14

MIDWIFERY STRATEGIC STAFFING REVIEW OCTOBER 2022

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Purpose of the paper	To provide a summary of the process for the Chief Nurse 6 month strategic staffing review for 2022		
Key control	This paper is a key control for the strategic objective to provide outstanding Care for patients.		
Action required	To approve		
Previously discussed at/ informed by			
Previously approved at:	Academy/Group	Date	
	People Academy - PA.10.22.17	26.10.22	

Key Options, Issues and Risks

This paper provides an overview of the midwifery establishment review process. The Chief Nurse is required to agree the staffing establishments and review these establishments on a 6 monthly basis to ensure safe, effective and sustainable staffing in the right place, at the right time with the right skills. Due to the impact of the Covid-19 pandemic there have been multiple changes to the ward reconfiguration to ensure the correct mix of bed base. This is managed and reviewed according to demand and adjusted as required. Challenges remain in relation to high accident and emergency attendance, high patient acuity, increase complexity of physical and mental health presentations for adults and children and increased deconditioning and frailty in older adults. In addition to the focus is to increase elective activity and manage waiting lists as a result of delays due to the pandemic.

The paper describes the approach used to make recommendations. The process has reviewed the establishments in all areas assessing if there has been a change in patient acuity / dependency or changes as a result of reconfiguration of services. Service developments will be considered as part of a formal business case process and are excluded from the recommendations of the review.

This paper provides the required assurance that Bradford Teaching Hospitals NHS Foundation Trust (BTHFT) plans safe midwifery staffing levels across all wards and departments. The paper also confirms that there are appropriate systems in place to manage the demand for midwifery staff.

The National Quality Board (NQB) publication: Supporting NHS providers to deliver the right staff, with the right skills, in the right place at the right time: Safe, Sustainable and Productive Staffing (2016) outlines expectations and the framework. In addition improvement resources have been published to support and underpin this approach in 2018 for adult inpatient wards in an acute hospital, children and young people, neonatal units and maternity services. These resources have been used to support establishment setting, approval and deployment from the ward sisters and charge nurses through to the Chief Nurse. The establishment review is also in line with NHS improvement, Developing Workforce Safeguards, October 2018. This document sets out a requirement for combining evidence based tools, professional judgement and outcomes to ensure the right staff with the right skills are in the right place at

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the right time. This has continued to form the basis of the structure of the establishment review meetings and is embedded into practice.

Figure 1: Principles of safe staffing



The safe, sustainable and productive staffing (SSPS) document describes that the key to high quality care for all, is our ability to deliver services that are sustainable and well led. For nurse and midwifery staffing, this means continuing our focus on planning and delivering services in ways that both improve quality and reduce avoidable costs, underpinned by the following three principles set out in the SSPS document and should be embedded into practice:

- Right care.
- Minimising avoidable harm.
- Maximising the value of available resource.

Hard Truths commitments regarding the publishing of staffing data (Care Quality Commission, March 2014) states '*data alone cannot assure anyone that safe care is being delivered. However research demonstrates that staffing levels are linked to the safety of care and that fewer staff increase the risk of patient safety incidents occurring*'. In order to assure the Board of Directors of safe staffing on our wards, this paper sets out the process of the strategic staffing review which has been undertaken in line with national guidance. The review has been a comprehensive assessment of each ward and department taking account of the following:

- Acuity and dependency data (from Safecare).
- Skill mix.
- Nurse to bed ratio.
- Incidence of pressure ulcers.
- Incidence of falls.
- Incidence of medication incidents.

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- Incidence of complaints relating to nursing care.
- The friends and family test results.

Analysis

As per previous reviews the Division of Midwifery has robustly reviewed all staffing in accordance with the recognised tools.

Recommendation

- To note the work undertaken and to support the proposed change in relation to specialist midwife posts.
- To continue to support the ambition in relation to continuity of care.

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Risk assessment						
Strategic Objective	Appetite (G)					
	Avoid	Minimal	Cautious	Open	Seek	Mature
To provide outstanding care for patients			g			
To deliver our financial plan and key performance targets			g			
To be in the top 20% of NHS employers					g	
To be a continually learning organisation				g		
To collaborate effectively with local and regional partners					g	
The level of risk against each objective should be indicated. Where more than one option is available the level of risk of each option against each element should be indicated by numbering each option and showing numbers in the boxes.	Low		Moderate	High	Significant	
	Risk (*)					
Explanation of variance from Board of Directors Agreed General risk appetite (G)						

Benchmarking implications (see section 4 for details)	Yes	No	N/A
Is there Model Hospital data relevant to the content of this paper?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is there any other national benchmarking data relevant to the content of this paper?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is the Trust an outlier (positive or negative) for any benchmarking data relevant to the content of this paper?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Risk Implications (see section 5 for details)	Yes	No
Corporate Risk register and/or Board Assurance Framework Amendments	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Quality implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Resource implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Legal/regulatory implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Diversity and Inclusion implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Performance Implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Regulation, Legislation and Compliance relevance
NHS Improvement: (please tick those that are relevant)
<input type="checkbox"/> Risk Assessment Framework <input type="checkbox"/> Quality Governance Framework <input type="checkbox"/> Code of Governance <input type="checkbox"/> Annual Reporting Manual
Care Quality Commission Domain: Safe
Care Quality Commission Fundamental Standard: Staffing
NHS Improvement Effective Use of Resources: Clinical Services
Other (please state):

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Relevance to other Board of Director's academies: (please select all that apply)			
People	Quality	Finance & Performance	Other (please state)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>