

Meeting Title	Board of Directors		
Date	19.01.23	Agenda item	Bo.1.23.17

NURSING AND MIDWIFERY STRATEGIC STAFFING REVIEW NOVEMBER 2022

Presented by	Professor Karen Dawber, Chief Nurse	
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Purpose of the paper	To provide the outcome and recommendation of 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	For approval	
Previously discussed at/ informed by		
Previously approved at:	Academy/Group	Date
	Executive Team Meeting	9.1.23
	People Academy	30.11.22

Key Options, Issues and Risks

Executive Summary

This paper provides an overview of the nursing and midwifery establishment reviews. 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 red, green and non-invasive ventilation (NIV) facilities are available to meet the surges in demand throughout from March 2020-present. At the current time there are challenges 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. Red Covid capacity is still required and 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, the slide set (appendix 1) shows a summary of the outcome and recommendations, appendix 2 shows the financial summary and appendix 3 shows the nursing bridge summary of changes as a result of reconfiguration, covid and acuity and dependency, including the investment made during this period. The process has reviewed and recommended the establishments in areas where there has been a change in patient acuity / dependency. During the process a number of service developments were described which will be considered as part of a formal business case process and are excluded from the recommendations of the review.

The paper summarises the outcome of the Chief Nurses recommendation.

There is an overall reduction in the cost of - **£369,853**. There has been an overall investment of **£ 5,371,962** in the nursing workforce since summer 2021 in line with the recommendations from previous reviews and the changes resulting from Covid and the site reconfiguration.

The recommendation supports the rise in acuity and dependency to maintain patient safety and quality of care delivery. A review of areas vacancy was considered when making recommendations and

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consideration of ways to support an existing workforce, more new nurses and how to help retain the existing workforce.

As part of the review there are areas of additional capacity as part of the winter planning. Whilst the funding for this sits separately to this process there has been a review of the numbers of staff for these areas to ensure safe staffing practices across all areas.

This paper provides the required assurance that Bradford Teaching Hospitals NHS Foundation Trust (BTHFT) plans safe nurse and midwifery staffing levels across all wards and other departments. The paper also confirms that there are appropriate systems in place to manage the demand for nursing and midwifery staff (previously presented). In order to provide greater transparency the paper provides detail of the strategic staffing review undertaken in line with the National Quality Boards requirements.

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 September 2022 establishment review meetings were also in line with the latest publication from NHS improvement in October 2018, Developing Workforce Safeguards. 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 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

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

The report is grounded in the need to ensure safe nurse and midwifery staffing levels and has been underpinned by the following publications/resources:

- NHS improvement – developing workforce safeguards, supporting providers to deliver high quality care through safe and effective staffing, October 2018.
- National Quality Board – Safe, sustainable and productive staffing - An improvement resource for adult inpatient wards in acute hospitals Edition 1, January 2018.
- National Quality Board – Safe, sustainable and productive staffing - An improvement resource for neonatal care, Edition 1, June 2018.
- National Quality Board – Safe, sustainable and productive staffing - An improvement resource for children and young people's inpatient wards in acute hospitals, Edition 1, January 2018.
- National Quality Board – Safe, sustainable and productive staffing - An improvement resource for Maternity, Edition 1, January 2018.
- National Quality Board – Safe, sustainable and productive staffing (SSPS). An improvement resource for adult inpatient wards in acute hospitals 2016 (2017 approved).
- Hard Truths – The Journey to Putting Patients First 'Hear the patient, speak the truth and act with compassion'. Published by the Department of Health 2014.
- National Quality Board report – How to ensure the right people, with the right skills, are in the right place at the right time. Published by NHS England 2013.

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- The Model Hospital Portal - a new digital information service provided by NHS Improvement to support the NHS to identify and realise productivity opportunities; key nursing information is contained within the portal. <https://improvement.nhs.uk/news-alerts/updates-model-hospital/>

Analysis

Following review of all the areas, recommendations have been made as detailed in appendix 1 and 2, with supporting financial information in appendix 3. There has been significant progress in terms of developing the recruitment and retention work plans, the development and implementation of new roles such as the Nursing Associate, development of apprenticeship pathways and trials of alternative roles to support nursing establishments, such as pharmacy technicians. There is an increased focus on the retention of the nursing and midwifery workforce and close links with Human Resources and the Organisational Development team. The Recruitment, Retention and Recognition Council are undertaking work in line with the Trusts submission of the Nursing and Midwifery Retention toolkit improvement plan.

Following the methodology outlined above, agreement was made between the relevant Director and Deputy Director of Nursing with the Chief Nurse for the recommended establishment. This included involvement of finance, operations and HR colleagues.

Recommendation

- The Board of Directors are assured of the process undertaken as part of the review in line with national recommendations.
- The Board of Directors are asked to support the recommendation of the Chief Nurse and Executive Management Team for the 6 monthly strategic nurse staffing review.
- The recommendation will come into effect from the 1st April and budgets and the rostering system will reflect the changes recommended.
- Exclusions to this proposal where there is agreement already in place to support winter preparedness and funding agreed.
- The Board of Directors are asked to note that where there is a change in service delivery the staffing implications will be presented as part of a business case from the CSU with Chief Nursing oversight of the recommendations related to nurse or midwifery staffing.

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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):

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"/>

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Appendices

Appendix 1 - Strategic staffing review presentation November 2022.

Appendix 2 - Summary financial information November 2022.

Appendix 3 – Nursing Budget Bridge January 2023.