

<b>TRUST BOARD IN PUBLIC</b>		<b>Date: 28 January 2016</b>	
		<b>Agenda Item: 2.2</b>	
<b>REPORT TITLE:</b>		Chief Nurse & Medical Director Report	
<b>EXECUTIVE SPONSOR:</b>		Fiona Allsop, Chief Nurse Des Holden, Medical Director	
<b>REPORT AUTHOR (s):</b>		Fiona Allsop, Chief Nurse Des Holden, Medical Director	
<b>REPORT DISCUSSED PREVIOUSLY:</b> (name of sub-committee/group & date)		N/A	
<b>Action Required:</b>			
<b>Approval (√)</b>	<b>Discussion (√)</b>	<b>Assurance (√)</b>	
<b>Purpose of Report:</b>			
To provide an update on continuing work in relation to safe and quality focussed patient care that sits outside the operational performance reports including monthly Safer Staffing information and exception reports.			
<b>Summary of key issues</b>			
<ul style="list-style-type: none"> <li>• The Safer Staffing report (December 2015 data) indicates that the Trust has delivered the planned versus actual staffing levels in the inpatient areas and maternity unit against existing template.</li> <li>• The current progress on nursing recruitment is outlined.</li> <li>• An update is provided on nurse revalidation and on the ward accreditation CQUIN</li> <li>• We have successfully recruited a consultant to take on clinical lead for radiology and for health informatics</li> <li>• We will establish a novel way of working with patients and industry so that the benefits from drugs which matter most to patients are understood by the pharmaceutical industry having received the go ahead from NHS England</li> </ul>			
<b>Recommendation:</b>			
To note the report.			
<b>Relationship to Trust Strategic Objectives &amp; Assurance Framework:</b>			
<b>SO1:</b> Safe -Deliver safe services and be in the top 20% against our peers <b>SO2:</b> Effective - Deliver effective and sustainable clinical services within the local health economy <b>SO3:</b> Caring – Ensure patients are cared for and feel cared about <b>SO4:</b> Responsive – Become the secondary care provider and employer of choice our catchment population <b>SO5:</b> Well led: Become an employer of choice and deliver financial and clinical sustainability around a clinical leadership model			
<b>Corporate Impact Assessment:</b>			
<b>Legal and regulatory impact</b>	Yes		

<b>Financial impact</b>	Yes
<b>Patient Experience/Engagement</b>	Yes
<b>Risk &amp; Performance Management</b>	Yes
<b>NHS Constitution/Equality &amp; Diversity/Communication</b>	Yes
<b>Attachment:</b>	

## Chief Nurse/ Medical Director Report – 28 January 2016

### Chief Nurse Report

#### 1. Introduction

To provide an update to the Board on nursing staffing in relation to planned versus actual staffing, an update regarding safer staffing monitoring, and a summary of the recent correspondence in relation to staffing and efficiency and on recruitment activity.

#### 2. Staffing Planned versus Actual – December 2016

Ward	Ward Specialty	Entries	RN Day	RN Night	NA Day	NA Night	Total Day	Total Night	Overall
<a href="#">Abinger Ward</a>	430 - GERIATRIC MEDICINE	31	91.59%	100%	95.74%	100%	93.77%	100%	95.99%
<a href="#">Acute Medical Unit</a>	300 - GENERAL MEDICINE	31	95%	98.62%	87.87%	93.55%	92.91%	96.77%	94.63%
<a href="#">Birthing Centre</a>	501 - OBSTETRICS	31	95.58%	79.03%	N/A	N/A	95.58%	79.03%	87.31%
<a href="#">Bletchingley Ward</a>	300 - GENERAL MEDICINE	31	97.11%	96.77%	94.87%	93.75%	96.03%	95.54%	95.84%
<a href="#">Brockham Ward</a>	502 - GYNAECOLOGY	31	93.89%	97.8%	97.83%	103.03%	95.19%	99.19%	96.79%
<a href="#">Brook Ward</a>	100 - GENERAL SURGERY	31	100%	98.36%	96.87%	N/A	98.94%	98.36%	98.71%
<a href="#">Buckland Ward</a>	101 - UROLOGY	31	94.1%	98.39%	90.67%	95.16%	92.87%	96.77%	94.32%
<a href="#">Burstow Ward</a>	501 - OBSTETRICS	31	98.11%	77.17%	86.89%	90.32%	94.37%	82.47%	88.98%
<a href="#">Capel Annex I Ward</a>	100 - GENERAL MEDICINE	31	100%	100%	97.85%	100%	99.08%	100%	99.41%
<a href="#">Capel Ward</a>	430 - GERIATRIC MEDICINE	31	93.53%	100%	90.91%	100%	92.53%	100%	95.76%
<a href="#">Chaldon Ward</a>	300 - GENERAL MEDICINE	31	94.52%	100%	98.91%	100%	96.37%	100%	97.63%
<a href="#">Charlwood Ward</a>	301 - GASTROENTEROLOGY	31	91.05%	100%	110.36%	100%	98.5%	100%	99.07%
<a href="#">Cophorne Ward</a>	301 - GASTROENTEROLOGY	31	96.49%	96.77%	101.62%	101.61%	98.2%	99.19%	98.6%
<a href="#">Coronary Care Unit</a>	320 - CARDIOLOGY	31	93.57%	98.41%	N/A	100%	95.71%	98.95%	97.34%
<a href="#">Delivery Suite</a>	501 - OBSTETRICS	31	93.34%	94.62%	89.76%	96.77%	92.44%	95.16%	93.8%
<a href="#">Discharge Lounge</a>	300 - GENERAL MEDICINE	31	98.25%	100%	94.48%	100%	96.41%	100%	97.61%
<a href="#">Godstone Ward (Haem)</a>	303 - CLINICAL HAEMATOLOGY	31	96.77%	100%	N/A	N/A	96.77%	100%	98.39%
<a href="#">Godstone Ward (Med)</a>	300 - GENERAL MEDICINE	31	94.17%	100%	97.85%	97.85%	95.55%	98.92%	96.99%
<a href="#">Hazelwood</a>	300 - GENERAL MEDICINE	31	95.93%	98.36%	97.34%	100%	96.62%	99.18%	97.65%
<a href="#">Holmwood Ward</a>	320 - CARDIOLOGY	31	91.71%	100%	100%	100%	93.95%	100%	96.08%
<a href="#">ITU/HDU</a>	192 - CRITICAL CARE MEDICINE	31	98.59%	97.3%	86.16%	113.33%	96.81%	98.5%	97.62%
<a href="#">Leigh Ward</a>	110 - TRAUMA & ORTHOPAEDICS	31	94.75%	100%	98.75%	96.77%	96.47%	98.36%	97.1%
<a href="#">Meadvale Ward</a>	430 - GERIATRIC MEDICINE	31	88.61%	100%	97.83%	100%	93.41%	100%	95.63%
<a href="#">Neonatal Unit</a>	420 - PAEDIATRICS	31	97.45%	100%	96.77%	100%	97.26%	100%	98.53%
<a href="#">Newdigate Ward</a>	110 - TRAUMA & ORTHOPAEDICS	31	92.63%	95.16%	112%	101.56%	100.65%	98.41%	99.89%

<a href="#">Nutfield Ward</a>	430 - GERIATRIC MEDICINE	31	96.09%	98.39%	101.6%	100%	98.03%	99.19%	98.43%
<a href="#">Outwood Ward</a>	420 - PAEDIATRICS	31	91.28%	100.54%	88.96%	74.19%	91%	96.76%	93.41%
<a href="#">Rusper Ward</a>	501 - OBSTETRICS	31	99.19%	100%	100%	N/A	99.21%	100%	99.47%
<a href="#">Surgical Assessment Unit</a>	100 - GENERAL SURGERY	31	95.16%	96.77%	96.77%	100%	95.48%	98.39%	96.77%
<a href="#">Tandridge Ward</a>	300 - GENERAL SURGERY	31	92.17%	96.77%	94.2%	96.77%	93.08%	96.77%	94.26%
<a href="#">Tilgate Annex</a>	100 - GENERAL MEDICINE	31	94.16%	96.92%	95.71%	100%	94.74%	98.43%	95.99%
<a href="#">Tilgate Ward</a>	300 - GENERAL MEDICINE	31	108.46%	119.23%	113.04%	119.23%	110.19%	119.23%	113.2%
<a href="#">Woodland Ward</a>	100 - GENERAL SURGERY	31	91.28%	100%	94.31%	91.67%	92.43%	95.9%	93.58%
<b>Total</b>			<b>95.15%</b>	<b>97.89%</b>	<b>97.11%</b>	<b>98.27%</b>	<b>95.81%</b>	<b>98.03%</b>	<b>96.69%</b>

### Commentary

The Trust has delivered planned versus actual staffing profile for December. The variance in the Birthing Centre and Burstow ward was due to staffing shortfalls related to short notice sickness and active management by the matrons ensured no adverse outcomes in relation to clinical care. The maternity service is now fully recruited. .

### Nursing Recruitment

National and international nursing recruitment continues. The Filipino recruitment is continuing and the first cohort of staff of 10 staff have commenced in the Trust. In addition 6 trained nurses have also commenced from the EU bringing the total number of international nurses to commence in the organisation to approximately 60 since July 2015.

### Agency cap

Weekly reporting is now established and demonstrates a reduction in overall nursing agency usage against the cap parameters. An exception has now been received for two non-framework providers until 31 March 2016.

### Nurse Revalidation

Revalidation for registered nurses commences in April 2016. The Trust has identified that there are approximately 90 staff members due to revalidate in the first quarter of 2016/17. All of these nurses have been contacted with key information and advice on the actions that need to be undertaken. A dedicated revalidation page has been set up on the intranet with links to the relevant documentation on the NMC website and drop in clinics have been arranged for the 27<sup>th</sup> January and the 24<sup>th</sup> February. In addition, ward based training has been made available and a stand outside of the Three Arches restaurant will be held on February.

### Ward Accreditation

Over recent months, the Trust has been developing a multi-disciplinary ward accreditation tool. The purpose of the tool is to develop a single method of measuring how each ward is performing against the CQC standards, for wards to analyse and learn from the outcomes of these measures and then for support to be provided to those areas that need it. Equally, its aim is to celebrate success by developing a system for recognising high performing wards which have the standard of an accredited ward. A pilot and three workshops have been held to date, with a work stream now in place to develop the electronic data entry system. Going forward, a long term aim and use of the tool will be for wards to demonstrate how they have incorporated the SASH+ principles into clinical

practice by demonstrating that quality improvements have been made through the implementation of the SASH+ methodology. Ward Accreditation is a local CQUIN for 2015/16 and the Trust is currently on track with the requirements of the quality improvement measure.

## **Medical Director Report**

### **3. Clinical Lead for Radiology and Clinical Chief of Informatics.**

We have recruited Dr Tony Newman – Sanders to lead radiology (taking over from Dr Riaz Ahmed) and provide clinical leadership for the health informatics processes formerly led by Dr Ben Upton. Tony is an established consultant currently working at Croydon University hospitals. He has a lot of experience with Cerner and is also the medical director of the Health Innovation Network (The South London Academic Health Science Network) a role he will continue.

### **4. What medication outcomes matter to patients?**

Unlike in the USA where pharmaceutical companies can market direct to patients, it has become clear that industry has difficulty finding out what therapeutic outcomes matter to patients from the drugs they make available to clinicians. We have received permission (and encouragement) from Sir Bruce Keogh, medical director of NHS England, to explore how we as a hospital can work with the pharmaceutical industry to promote a dialogue between us, them and patients so that industry contribute in a more focussed and precise way on meeting the therapeutic needs of patients. Sir Bruce's challenge to us is to make it happen in a way that benefits the wider NHS.

### **5. Recommendation**

To note the report

**Fiona Allsop**  
**Chief Nurse**  
25<sup>th</sup> January 2016

**Des Holden**  
**Medical Director**