

Appendix 7 of Operational Guidance: Health board/trust reporting template

Health boards/trusts are advised to use this template when submitting their annual report to Board. Health boards/trust may include additional information as part of their report as determined by the organisation.

Health board/trust reporting template

Health board	Cwm Taf Morgannwg University Health Board (This report is specific to the Princess of Wales Hospital)
Reporting period	1 st April 2018 - 31 st March 2019
Requirements of Section 25A	<p>The triangulated approach was used and considered the opinions of the nursing management structure, the requirements to levy an uplift of 26.9% and that the ward sister/charge nurse should be supernumerary to the planned roster.</p> <p>The triangulated approach was undertaken and reported for the following periods:</p> <p>1st August 2017- 31st January 2018</p> <p>1st February 2018 – 31st August 2018</p> <p>Quality Indicators</p> <ul style="list-style-type: none"> • Total falls (with or without harm) • Hospital acquired pressure ulcers • Medication errors • Complaints and concerns • Dependency and acuity <p>All NSA wards in POW have funding for supervisory ward sister/charge nurse and 26.9% uplift</p>



Financial Year 2018/2019

Date annual report on the nurse staffing level submitted to the Board

April 2019

Number of adult acute medical inpatient wards where section 25B applies

Medical Wards

Ward	Type of Ward	Number of Beds	Establishment		Additional information	NSA complaint
			RN	HCSW		
MEDICAL WARDS						
2	Acute Stroke	24	20.07	13.62	Includes 2 high care bays	YES
4	Cardiology	31	28.24	13.62	Includes 2 high care cardiac monitored bays	YES
5	Respiratory	23	23.79	10.9*	Includes 2 high care bays one comprising of six beds with NIV This ward has a co-ordinator Monday to Friday 08.30-16.30 (included in wte)	NO Additional funding of 2.72wte HCSW required to bring wte up to *13.62
6	Gastroenterology and Endocrinology	27	22.28	13.62	3 of the 27 are gastro day unit (11.5hrs 5 days a week)	YES
20	Acute medicine (Elderly)	22	20.07	13.62	Ward layout challenging to observe patients	YES



Wards excluded

- Ward 18 – Elderly Care/Shared care
- Ward 19 – Elderly Care
- Emergency Department
- Acute Medical Admissions Unit
- Intensive Care Unit



Number of adult acute surgical inpatient wards where section 25B applies

Ward	SURGICAL WARDS	Number of beds	RN est	HCSW est	Additional information	NSA compliant
7	Surgical	28	20.07	13.62		YES
8	Surgical	28	21.07	13.62	This ward has a co-ordinator Monday to Friday 08.30-16.30 (included in wte)	YES
9	Elective orthopaedic	28	20.07	10.90*	This ward also accepts "screened" trauma patients	YES However due to the mix of elective and trauma patients Additional funding of 2.72wte HCSW required to bring wte up to *13.62 Gap is currently covered by temporary staffing
10	Trauma orthopaedic	29	20.07	13.62		YES However due to dependency and acuity of patients Additional funding of 2.72wte HCSW required to bring wte up to *16.36



11	Gynae and medical outlier ward	18	17.46	9.83	Due to medical patient case mix this is staffed as a medical ward This ward also has Early Pregnancy Clinic running	NO Additional funding of 0.22 wte HCSW required. Professional nursing opinion based on acuity and dependency of patients is that ward requires an uplift of 1.79wte HCSW
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Wards excluded

- Private Patients Unit
- Short Stay Unit

Number of occasions where nurse staffing level was recalculated in addition to the bi-annual calculation

None

The process and methodology used to inform the triangulated approach

The triangulated approach was used and took into consideration the opinions of the nursing management structure, the requirements to levy an uplift of 26.9% and that the ward sister/charge nurse should be supernumerary to the planned roster.

The triangulated approach was undertaken and reported for the following periods:

1st August 2017- 31st January 2018



1st February 2018 – 31st August 2018

Quality Indicators

- Total falls (with or without harm)
- Hospital acquired pressure ulcers
- Medication errors
- Complaints and concerns
- Dependency and acuity

All NSA wards in POW have funding for supervisory ward sister/charge nurse and 26.9% uplift

POW currently does not have its own nursing workforce strategy as this was incorporated into the larger ABMU strategy.

Recruitment

Nurse recruitment in POW is led by the Senior Matrons and they currently hold open evenings every 2 month. Bespoke showcasing events have taken place and nurses who have shown an interest at these events all receive a follow up email.

The Senior Matrons attend University showcasing events in relation to Student Streaming.

Recent review and updating of recruitment adverts/posters / social media information has been undertaken.

There are plans to access Cardiff and Vale University show case event by the end of the year.



Retention

PoW has recently piloted and been successful in implementing qualified rotational posts between acute respiratory medical wards and Intensive Care. Further pilots involving other specialities are being explored.

Informing patients

All Wales NSA boards are displayed at the entrance of the relevant wards

Section 25E (2a) Extent to which the nurse staffing levels are maintained

Process for maintaining the nurse staffing level

Operationally PoW has a Matron of the day allocated for staffing

Data with regard to Staffing levels on the wards is uploaded on a shift by shift basis into a dedicated spreadsheet in order to provide an overview of all staffing levels in all areas.

Ward staffing levels are reported three times a day at the bed meetings and staff are redeployed as required by the matron of the day responsible for staffing

If a ward has an emerging staffing issue a risk assessment is completed and the Senior Management Team management will make a decision regarding actions that need to be taken to mitigate this risk. Mitigation actions may include: temporary closure of beds, temporary redeployment of staff etc from other areas.

The Allocate system has a “safe staffing module” and would recommend that this be considered going forward.

Process for monitoring the nurse staffing level

PoW holds monthly documented, directorate roster meetings (attendees include Directorate Manager, Matron, Ward sisters/charge nurses, HR representative, finance representative). This meeting focuses largely on the KPI's listed in the Roster Policy. The data is not yet granular enough to record variations of planned v actual roster. This is work in progress.

Section 25E (2b) Impact on care of not maintaining the nurse staffing levels

Reporting period 1st April 2018 – 31st March 2019 inclusive

Patient harm incidents (i.e. nurse-sensitive Serious Incidents /Complaints)	Total number of closed serious incidents/complaints during last reporting period	Total number of closed serious incidents/complaints during current reporting period.	Increase (decrease) in number of closed serious incidents/complaints between reporting periods	Number of serious incidents/complaints where failure to maintain the nurse staffing level was considered to have been a factor
<input type="checkbox"/> Hospital acquired pressure damage (grade 3, 4 and unstageable).	Not applicable for this period	Two (2) grade 3 hospital acquired pressure ulcers Twenty eight(28) unstageable hospital acquired pressure ulcers	Not applicable for this period as this is the first reporting period	
<input type="checkbox"/> Falls resulting in serious harm or death (i.e. level 4 and 5 incidents).	Not applicable for this period	Zero (0) falls resulting in serious harm or death (i.e. level 4 and 5 incidents).	Not applicable for this period as this is the first reporting period	
<input type="checkbox"/> Medication related never events.	Not applicable for this period	One (1) On the 21/3/18 – ward 7 managed as a Never Event	Not applicable for this period as this is the first reporting period	
<input type="checkbox"/> Complaints about nursing	Not required to report on until next reporting period	Not required to report on until next reporting period	Not required to report on until next reporting period	Not required to report on until next reporting period



care resulting in patient harm (*) (*)This information is not required for period 2018/19				
Section 25E (2c) Actions taken if the nurse staffing level is not maintained				
Actions taken				
Next steps				