The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

Meeting:	Board of Directors (in Public)		
Meeting Date:	3 November 2020	**Agenda item:**	13
Report Title:	Nursing Establishment Review		
Author:	Edmund Tabay, Deputy Chief Nurse		
Executive Sponsor:	Dr April Brown, Chief Nurse		

Implications

Link to key strategic objectives
[highlight which KSO(s) this recommendation aims to support]

KSO1	KSO2	KSO3	KSO4	KSO5	KSO6
Safe and compassionate care	*Modernise hospital and estate*	*Staff engagement*	*Partnership working, clinical and financial sustainability*	*Healthy lives staff and patients*	*Investing in our staff*

Board assurance framework	The indicators reported support the delivery of safe and effective care as set out in KSO1.	
Significant risk register	Divisional and Corporate Risks	
	Y/N	If Yes state impact/ implications and mitigation
Quality	Y	Nursing establishments are required to be reviewed bi-annually to provide assurance to the Trust Board that staffing levels and staff to patient ratios are appropriate to deliver safe and effective quality care (National Quality Board, 2016).
Legal and regulatory	Y	Meeting Care Quality Commission requirements under the Fundamental Standards including regulations 18 (Staffing) and 12 (Safe care and Treatment).
Financial	Y	Changes in nursing establishments have financial impact.

Assurance route

Previously considered by:	Quality Committee 27 October 2020.

Executive summary

Action required: *[highlight **one** only]*	Approval	**Information**	Discussion	Assurance	Review

Purpose of the report:	To provide the Board of Directors with the Nursing Establishment Review for the year 2020.
Summary of Key issues:	• Nursing establishments are required to be reviewed bi-annually to provide assurance to the Trust Board that staffing levels and staff to patient ratios are appropriate to deliver safe and effective care (National Quality Board, 2016). The last nursing establishment review paper went to the Trust Board in February 2020. • It is recognised internationally that there is no single method that can be used in isolation to determine nursing establishments in the acute care setting. As such, in our Trust (as in hospitals across the country) we use multiple evidence based tools when considering the needs of our patients over a 24 hour, seven day period.

	• This review took place in August 2020 using the Safer Nursing Care Tool (SNCT), with data collected daily for 20 days. Discussion took place with the ward managers and one or two designated staff who were asked to collect the information required. • Maternity, Intensive Care Unit, Neonatal Intensive Care unit, Paediatric ward and Emergency Department establishment reviews do not form part of this report, yet will in the future to ensure that we have full view of all clinical areas in the hospital. In addition, wards whose functions have changed during the COVID-19 pandemic were not included in the review as the acuity and dependency of patients did not reflect their specialties. The wards not included in the review are: Elm, Surgical Assessment Unit, Necton, Marham, Stanhoe, Tilney and West Raynham. A review is recommended once wards have identified their established functions. • The majority of wards were broadly in line with the proposed SNCT establishments from the acuity and dependency scores and the Care Hours per Patient Day (CHpPD) are comparable to wards of similar specialties using the Model Hospital data. • Two wards (Oxborough and Windsor) have been identified requiring an increase to their establishments of 4.55 Whole Time Equivalents each. The increase equates to an additional funding of circa £148,064 for each ward per annum.
Recommendation:	The Board is asked to note the content of the report.
Acronyms	CHpPD- Care Hours per Patient Day SNCT-Safer Nursing Care Tool WTE-Whole Time Equivalents