

Agenda Item: 3ii

Report to:	Board of Directors	Date: 2 May 2019
Report from:	Chief Nurse and Medical Director	
Principal Objective/ Strategy and Title:	GOVERNANCE: COMBINED QUALITY REPORT Patient Safety, Effectiveness of Care, Patient Experience and DIPC	
Board Assurance Framework Entries:	Unable to provide safe, high quality care BAF numbers: 742, 675, 1511 and 1878	
Regulatory Requirement:	CQC	
Equality Considerations:	None believed to apply	
Key Risks	Non-compliance resulting in poor outcomes for patients and financial penalties	
For:	Information	

1. Purpose/Background/Summary

The Medical Director and Chief Nurse would like to highlight the following in addition to the Papworth Integrated Performance Report (PIPR) to the Board:

2. Safety-Safer Staffing (BAF 742) March

	REGISTERED DAY	UNREGISTERED DAY	REGISTERED NIGHT	UNREGISTERED NIGHT
CMU	84.8%	74.1%	98.5%	121.0%
HEMINGFORD & HDU	100.3%	114.1%	100.0%	193.5%
CF WARD	97.4%	100.6%	121.0%	-
HUGH FLEMING	69.2%	109.3%	95.2%	193.5%
MALLARD & PCU	87.0%	117.1%	94.1%	132.9%
RSSC	88.2%	48.6%	88.0%	71.6%
VARRIER JONES	83.4%	114.3%	89.6%	101.1%
CRITICAL CARE	99.2%	70.9%	101.9%	76.6%
DAY WARD	84.8%	84.9%	-	-

Exceptions

**CMU:** Improved position on days for registered nurse fill rate. Fill rate due to RN vacancies. Where required, co-ordinator taking patients to maintain safety.

**Hemingford:** Fill rates for unregistered staff because of enhanced care requirements (including HDU area).

**CF Ward:** Where required, higher fill rate for registered and unregistered, because of enhanced care requirements.

**Hugh Fleming:** Low registered nurse fill rate due to vacancies. Overseas pre-reg providing direct care supported by co-ordinator. Unregistered required for enhanced care requirements.

**Mallard:** RN fill rate due to vacancies (there is work in progress which is improving this position). Care supported by co-ordinator, supernumerary Ward Sister and CPD staff as required. Unregistered required for enhanced care requirements.

**RSSC:** Improved position from previous month for registered nurses (days). Unregistered staff fill rate due to vacancies; staffing levels and skill mix is monitored on a daily basis. Staffing levels adjusted as required for patient activity.

**VJ:** RN fill rate due to vacancies. Overseas pre-reg providing direct care supported by co-ordinator. Unregistered required for enhanced care requirements.

**CCA:** Unregistered vacancies support provided by registered workforce as appropriate.

**Day Ward:** Staffing levels adjusted to activity as required. Unregistered staff fill rate is an improved position from the previous month.

### 3. DIPC (BAF 675):

**Bed closures for IPC issues in March 2019:**

Ward	Number of bed days in March 2019	Reason
Mallard	8	CPE contacts

### 4. Inquests/Investigations

#### Patient A

Patient underwent double lung transplant and required further lobectomy with subsequent pneumonectomy 18 months after initial surgery. Patient admitted to local hospital at the end of 2018 with an infection and sadly died.

Cause of death:

- 1a Cardiorespiratory arrest – community acquired cavitating pneumonia
- 2 Bilateral lung transplant, right sided pneumonectomy

Conclusion: Natural cause

The Trust currently has 30 Coroner's investigations/inquests pending with 7 out of area.

#### Recommendation:

**The Board of Directors is requested to note the contents of this report.**