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| To: | Trust Board |
| From: | Michelle Rhodes, Director of Nursing |
| Date: | Tuesday 6 th June 2017 |
| Essential Standards: | Health and Social Care Act 2008 (Regulated Activities) Fundamental Standards of Care Regulation 9: Person Centred Care, Regulation 10: Dignity and Respect, Regulation 13: Safeguarding Services Users, Regulation 14 Meeting nutritional hydration needs, Regulation 12: Safe Care and Treatment |

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| Title: | Improving oversight of nursing care through a daily ward assurance visit – “Golden Hour” |
| Author/Responsible Director: Michelle Rhodes, Director of Nursing Penny Snowden, Deputy Director of Nursing | |
| Purpose of the Paper: | |
| <p>The paper informs the Trust Board of the Corporate Nursing’s initiative known as the “Golden Hour” which is a daily assurance visit undertaken by senior nurses/ midwives to the wards. The paper outlines the findings from the pilot. The Trust Board is also requested to support the Trust wide implementation of the Golden Hour. This will involve protecting the Golden Hour (3-4pm) daily so that senior nurses are free from other activities to be able to visit the clinical area to complete the daily assurance process</p> | |
| Background | |
| <p>The recent CQC report makes reference to nurse leaders not being briefed on the standard of nursing practice which is delivered consistently to patients; as there is a distinct lack of senior visibility and challenge. This, the inspectors reported, led to a culture of normalising poor practice. The corporate and senior nursing team have responded to this finding through the development of the “Golden Hour” daily assurance visit; an initiative adapted from Plymouth Hospitals NHS Trust.</p> | |
| <p>The term ‘Golden hour’ has been used in medicine to describe the first hour following a traumatic injury/ incident where action taken can result in much higher survival rates. This term has been applied to the daily assurance visit to describe a period of 1 hour where Deputy Chief Nurses, Heads of Nursing, Matrons and Ward Managers will dedicate their time to establishing assurance that the patients on their wards are safe and well cared for.</p> | |
| <p>The senior leaders will follow a standard operating procedure and assurance visit template (See Appendix One) so there is consistency in approach across the Trust. The metrics are aligned to Ward Accreditation so provide daily reinforcement of the high standard of care expected from nursing to ensure that all patients receive great care and therefore have a positive experience.</p> | |

“Golden Hour” has been piloted on Wards 6A, 6B, 7B, 8A, Bostonian and 3B, Pilgrim Hospital for the duration of 4 weeks. The Commissioners also assisted the Matrons during the pilot to bring external objectivity to observations. The Matrons involved presented back to the Heads of Nursing Forum of their findings. On commencement of the pilot, Matrons reported:

- Risk Assessments not always completed
- Waterlow Scores not calculated correctly
- Cluttered Wards
- Lying and Standing Blood Pressure not undertaken
- Call bells not responded to in timely fashion
- IV lines not labelled
- Lack of consistent documentation to evidence oral hygiene
- Full sharps bins
- Unlocked notes trollies

On the positive side, the Matrons reported:

- Staff responsive and willing to action issues promptly
- Good compliance amongst clinical staff with BBE
- SSKIN (Pressure Ulcer Prevention Care Plan) Embedded into practice
- MCA/DoLs in place where appropriate

As the pilot progressed, the Matrons reported that:

- Wards became less cluttered
- Greater compliance with “green is clean” to demonstrate that equipment had been decontaminated was evident
- Risk Assessments improved
- Increased staff engagement and responsiveness

Increased clinical presence during the pilot led to the Matrons

- Ensuring that cleaning rotas were in place
- Lockable Notes Trolleys were ordered and now in place
- Sluices were reorganised to be tidier and commode racks were ordered and in place
- Support with learning was provided e.g. lying and standing blood pressure. SQD data for lying and standing blood pressure has increased from 67.8%(Feb) to 88% (April)

The Matrons reported that they felt that the Golden Hour provided a structured approach to have a consistent daily presence on the wards to enable them to support the ward with learning, identifying good practice but to also challenge poor performance. They valued the consistent approach so that staff were aware that this was an assurance process and not personal. Commissioners also reported improvements as the pilot progressed with similar themes as outlined above

Whilst the pilot was short, the benefits have been significant suggesting that immediate action taken following consistent daily presence on the wards can drive standards of nursing practice up. Monthly progress will be monitored through the Nursing Assurance Framework meaning that there is a governance process to ensure that the Golden Hour can be embedded.

The Heads of Nursing therefore supported the Trust Wide implementation with Deputy Chief Nurses and Heads of Nursing undertaking three visits a week

The senior nurses did identify conflicting priorities and expectations from clinical directorates or the operational meetings may prevent “golden hour” being successfully embedded. It is therefore vital that the golden hour is protected meaning that meetings would need to be rescheduled across the Trust to protect this hour and that the hour would be supported by all Executives and their portfolio obligations.

The Trust Board is requested to note the contents of the report and the improvement already made through the pilot. Trust wide implementation will continue to drive improvement and to achieve this; the Trust Board is requested to approve the protection on the daily golden hour.

The Report is provided to the Board for:

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| Decision | X | Discussion | |
| Assurance | | Information | X |

Summary/Key Points:

Please see attached documents

Recommendations: To support the scheme

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| Strategic Risk Register Recent CQC inspection rating | Performance KPIs year to date |
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Resource Implications (e.g. Financial, HR) Protection of One hour (3-4pm) daily

Assurance Implications: Review will be integral to the Trust’s evidence of achieving assurance with Health and Social Act 2008 (2014) regulatory activities

Patient and Public Involvement (PPI) Implications: Improved patient experience due to higher quality care being delivered consistently

Equality Impact - none

Information exempt from Disclosure

Requirement for further review?