

NORTHUMBERLAND, TYNE AND WEAR NHS FOUNDATION TRUST

Board Report

Meeting Date: Wednesday 28th February 2018

Title and Author of Paper: Safer Staffing Quarter 3 Report including 6 month Skill Mix Review,
Jackie King, Clinical Nurse Manager and Anne Moore, Group Nurse Director

Executive Lead: Gary O'Hare, Executive Director of Nursing and Chief Operating Officer

Paper for Debate, Decision or Information: Information

Key Points to Note:

1. The report includes exception data and analysis of all ward staffing against Safer Staffing levels for Quarter 3.

Some wards are outside of the agreed staffing levels this quarter, the report focuses on exception reporting those wards whose combined qualified and unqualified data do not achieve a minimum of 95% for either days or nights.

Wards which experienced staffing pressures were able to maintain safe patient care through use of roster management and the staffing escalation procedure. There were no instances of harm attributed to safer staffing levels.

2. Alongside this the report includes narrative on the activity related to the 6 monthly Skill Mix Review.
3. The report also includes a summary of the Carter Review work and expectations of NHSI guidance published in January 2018 on behalf of the National Quality Board regarding next steps for Safer Staffing. It is proposed that future reports to Board will include a brief narrative / exception report mapping vacancies, incidents and percentage of sickness against wards in line with the new guidance.

Risks Highlighted to Committee: None

Does this affect any Board Assurance Framework/Corporate Risks?: No

Equal Opportunities, Legal and Other Implications: N/A

Outcome Required: The Board of Directors are asked to note the content of the report.

Link to Policies and Strategies: Safer Staffing; Carter 90 Day Rapid Improvement Review

Background

In line with the National Quality Board Guidance issued in November 2013, and in order to assist provider organisations to fulfil their commitments as outlined in Hard Truths (now known as Safer Staffing) the Government made a number of commitments to make this information more publically available. The Trust continues to comply with the requirements of safer staffing.

The commitments were;

- To publish staffing data from April 2014.
- A Board report describing the staffing capacity and capability, following an establishment review, using evidence based tools where possible. To be presented to the Board every six months.
- Information about the nurses, midwives and care staff deployed for each shift compared to what has been planned and this is to be displayed at ward level.
- A Board report is made available containing details of planned and actual staffing on a shift by shift basis at ward level for the previous months. To be presented to the Board every three months.
- The quarterly report must also be published on the Trust's website, and Trusts will be expected to link or upload the report to the relevant hospital(s) web page on NHS Choices.

NTW has adopted a robust application of the guidance including;

- An agreed methodology is in place incorporating both the electronic and paper rostering systems to gather the staffing information in a systematic manner.
- RAG system is in place to alert Group Nurse Directors of any wards that have deviated from the agreed staffing levels.
- Ward Managers report on a weekly basis highlighting any variance and reasons why on the planned staffing for their ward.
- An escalation process is in place for both in hours and out of hours including on call mechanisms.
- The information is collated to support analysis of ward staffing.
- A Clinical Nurse Manager who oversees the process and escalates as required to service and director leads.
- Safer staffing is discussed and monitored at ward/service group and key Trustwide meetings.

The Care Quality Commission (CQC) will seek compliance with all the actions as part of their inspection regime and NHS Improvement will act where the CQC identifies any deficiencies in staffing levels in Foundation Trusts.

Quarter 3 update

A number of the wards are outside of the agreed staffing levels this quarter and the focus is on those wards whose combined qualified and unqualified data do not achieve a minimum of 95% for either day or night duty (see Appendix 1). The exceptions and rationale have been listed below however going forward, in line with the new guidance, future reports will include a more in-depth analysis of this combined data.

Ward 3 and Ward 4, Walkergate Park

Both wards continue to have challenges in recruiting to qualified RGN vacancies and staffing levels remain lower than the planned staff levels. A rolling advert for the last six months has resulted in a number of bespoke recruitment sessions to encourage Registered General Nurses to join the Trust. The February 2018 recruitment campaign has resulted in a number of expressions of interest and it is hoped the six vacancies will be filled. On a positive note our International Nursing Recruits from India have begun arriving and have been allocated to Walkergate Park as they have RGN qualifications. They will be undertaking their clinical skills programme to enable NMC registration within six months. There still remains a significant risk area in relation to recruiting specialist Neurological / Registered nurses.

Akenside

Safer staffing levels data show 84.97% for day duty over the period, due to vacancies. Ward Manager continues to utilise the staffing in combination with Castleside to maintain safety given the acuity of patients.

Bede

Experienced unqualified staff are utilised to manage the qualified vacancies with regular review of the need of the ward. Safer staffing levels data show 87.47% for day duty, attributed to 2 qualified vacancies.

Woodhorn

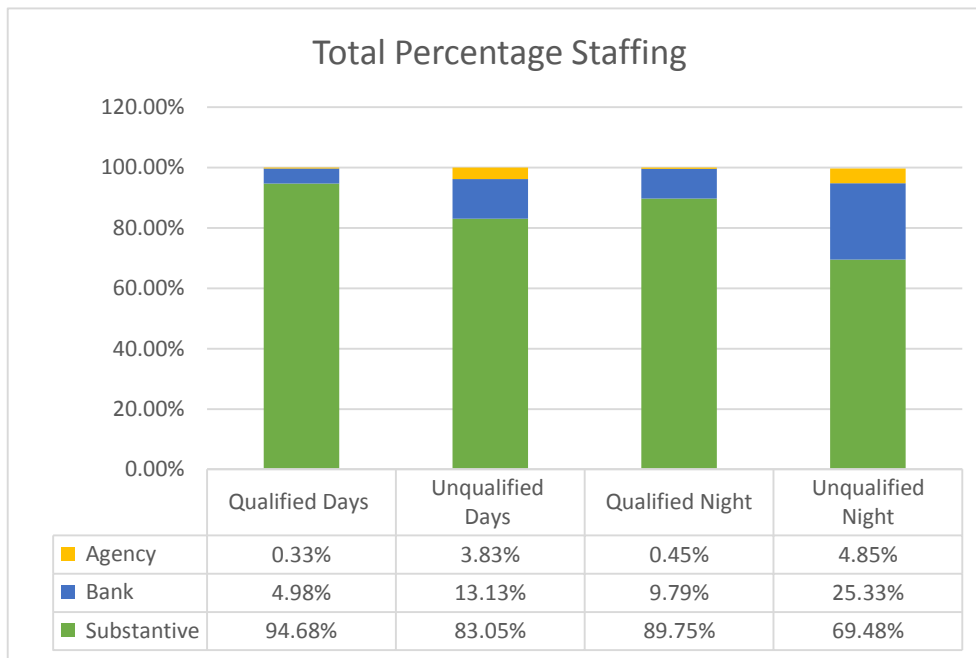
The ward has been under review and continues to be a focus for the group. As part of the Carter Work at St George's Park, where there is a site based approach to staff being shared this will not be reflected in Safer staffing levels. Safer staffing levels data show 87.72% for days.

Ward 31a

The ward has two qualified vacancies, however the ward has been utilising staff from Gibside to ensure that the staffing levels are met and this cannot be reflected in the Safer Staffing returns currently.

Reduction of Bank and Agency and Fill Rates

There is a continued reduction in the use of agency staff. The groups are identifying possible solutions to the use of temporary staffing and a more effective use of Staffing Solutions - Flexipool and Bank as illustrated below.



Nurse and AHP Staffing – Recruitment

Nursing and AHP Recruitment continues to be taken forward using Value Based Central Recruitment Campaigns. At the time of the report Campaign 22 was to go live. These campaigns have made a significant impact on filling vacancies in terms of nurse staffing. Vacancy rates are at their most favourable position for more than two years. However we know we have a significant number of potential retirees over the next two years and turnover will continue. Working together with Heads of Workforce, Heads of Business, and Group Nurse Directors the focus is on ensuring accurate establishments and skill mix reviews drive the future campaigns.

The Trust will be looking to share the success in Nursing and AHP Recruitment nationally as many other parts of the country continue to find recruitment extremely challenging.

The Trust will continue to create opportunities to build on success achieved to move into future recruitment using creativity, collaboration and consistency, share what has been learnt with other organisations, and to promote best practice.

Staffing Solutions

Staffing Solutions now manage all temporary and flexible staffing through one Central Team in the organisation, therefore enabling more creative and flexible approaches to any staffing shortfalls and ensuring compliance with stringent allocation and monitoring mechanisms. The RPIW action plan has resulted in a number of streamlined processes ensuring maximum fill rates to shifts and working closely with ward and team managers to understand staffing demands.

Skill Mix Reviews

Workforce plans and skill mix continue to be reviewed and scrutinised by service line taking into account demographic profiles, investment, and service developments. These are multi-professional and are utilised to inform the Trustwide Workforce Plan.

Every time a vacancy arises there will be consideration of clinical need, organisational risk and any skills or competency gap to ensure the post identified for recruitment is best fit for service and in line with Safer Staffing Requirements. This is an ongoing daily activity across the Trust. The newly formed Strategic Staffing group which includes Group operations, finance and workforce leads is taking forward the Bank and Agency and Carter Review actions to provide a clear direction

Group Nurse Directors are leading the skill mix review of establishments and this will be signed off with year-end budget setting and reported at the next Board update. In order to maximise skill mix Groups are considering the areas below as potential solutions:

Pathways into Nursing and Role Extensions

We have continued to implement the career and development pathways which underpin the Nursing Strategy and support our “grow your own” agenda. It is researched that un-qualified staff supported to undergo professional training remain loyal to the organisation and attrition rates for these staff is very low.

- **Pre Nurse Education programme;** over the last two years the Trust has supported eight participants through this programme. This provides those interested in nursing who have little or no health care experience with a year’s experience as a Healthcare Assistant. Five of those completing the programme have now commenced Nurse training and a further two are now applying to University. This again creates a pathway into professional training for those who historically might not have come into the NHS.
- **Nursing Associate Role;** as a member of the regional test site pilot the Trust is supporting the development of this new nursing support role which will bridge the gap between the role of Healthcare Support Worker and a Graduate Registered Nurse. Currently 13 staff are in training and the role and its place in skill mix is being evaluated nationally and locally. It is anticipated a further cohort will start in the Autumn as the government have announced a further 7500 TNA places for 2018/19.
- **Secondment to BS(c)Hons in Learning Disability Nursing;** further to the last six month update we have confirmed 12 students have commenced the course in January, in partnership with Teesside University to become registered Learning Disability Nurses in line with workforce plans. Learning Disability Nursing is difficult to recruit to and this initiative will support the growth of the future workforce in this important area.
- **Non-Medical Approved Clinicians;** the Trust has continued to support the development of senior professional staff from both nursing and psychology to enable them to become non-medical approved clinicians. This has improved patient care whilst maintaining safety, increased the diversity of appropriate clinicians, enabled full utilisation of skills of health professionals whilst promoting a more flexible and responsive workforce. These developments have been particularly significant in relation to the difficulties in Medical Recruitment in that their skills are complementing the wider Multidisciplinary Team. These wider multidisciplinary teams, with complementary roles, are able to be more responsive to changing clinical needs and assist where Medical Recruitment is difficult.

- **Gender Mix;** it has previously been highlighted in both the July and September 2017 Skill Mix Review papers that one of the current workforce challenges is gender mix. Male staff in the organisation are in a minority which can result in difficulties in meeting individual service user care preferences and privacy and dignity requirements. The Trust has recently worked with Northumbria Police through a bespoke targeted recruitment campaign. The potential to work with similar staff from the Fire and Rescue Service and the Military is also being explored. It is hoped that Campaign 22 will result in a number of male applicants for qualified and unqualified vacancies.
- **Non-Medical Prescribing:** the Non-Medical Prescribing Group has been refreshed following a change in leadership to note the governance which is now embedded and focuses on the workforce development need of this potential role extension for nurses and pharmacists. Groups have been asked to identify, as part of the skill mix reviews, the potential for the development of roles to support advancing practice and medical staffing challenges. An update will be provided for the next Board paper.

NHSI 90 Day Carter Review

The Trust were approached in early 2017 to participate in a cohort of 23 mental health and community trusts to look at e-rostering and other related issues. This followed on from similar work that was carried out the previous year in the Acute Sector, as part of Lord Carter's wider review.

The Trust Board agreed to participate and to date four national workshops have been attended. NHSI visited the Trust in October 2017 and a further visit, to include Lord Carter, was scheduled for 6th February 2018 which unfortunately had to be cancelled due to Lord Carter's commitments.

As part of the 90 Day Rapid Improvement Programme various data has been submitted to NHSI which has provided them an opportunity to work with Trusts to understand the productivity of different skill mix composition in inpatient wards.

It is recognised that the needs of patients using inpatient services are often quite different, therefore a new measure namely Care Hour per Patient Day (CHPPD) has been introduced. CHPPD provides a representation of the number of care hours available to patients and is a measure that enables wards of a similar size, speciality and patient group to be benchmarked both locally and across the cohort.

There are three main areas of focus which are:

- To examine the operational arrangements that exist at service delivery level which determine rostering forward based clinical staff, and to compare the planned hours of care with paid hours.
- To measure and compare workforce productivity and efficiency across NHS mental health and community providers (permanent and temporary staff).

- To identify those factors which appear to enable effective rostering management and so reduce the need for the use of agency staffing, which might then be replicated across the NHS in England.

Planned developments for Safer Staffing and Care Hours per Patient Day (CHPPD) going forward

The Group Nurse Director for Safer Care is proposing a reporting process with the Clinical Care Groups which will furnish future reports with details of inpatient wards where staffing levels fall outside of tolerance in three or more areas. The metrics for the tolerance areas being tested will include:

- skill mix
- newly registered nurse mix
- bank / agency hours
- vacancy factor
- incidents

To ensure that all of the inpatient wards remain engaged in safer staffing it is proposed that all Inpatient Managers and Matrons will have access to a dashboard to provide additional assurance to the Board that all inpatient areas have significant oversight of their performance against the key safe staffing metrics, and not just those included in the exception report.

National Quality Board and Safer Staffing

NHSI, on behalf of the NQB, published new guidance in January 2018.

Safe, sustainable and productive staffing outlines the expectations and framework within which decisions on safe and sustainable staffing should be made to improve health outcomes. It ensures delivery of safe, effective, caring, responsive and well-led care on a sustainable basis, and that organisations employ the right staff with the right skills in the right place and at the right time.

This improvement resource makes specific reference to adopting these expectations in mental health services, recognising the nuances that exist in this provision. The content has been developed by a reference group of sector leaders and was informed by a review of literature, in consultation with service users and carers. It aims to provide quality and consistency through the recommendations for board accountability and expectations of clinical leaders at service and team levels.

Example dashboard templates to monitor safe, sustainable and productive staffing, and escalation processes have been included, as well as an outline of a strategic staffing review. This resource also lists documents relevant to safe, sustainable and productive staffing in mental health services.

While this improvement resource focuses on the expectations of provider organisations, it also supports commissioners in developing their own assurance framework. Furthermore, the standards and tools given in this resource inform the staffing aspects of effective commissioning of future mental health services and pathways.

Boards are accountable for ensuring safe, sustainable and productive staffing and a comprehensive staffing review must be provided annually to them. A summary of the key issues to consider in the delivery of safe, sustainable and productive staffing will be provided at the next Board meeting.

Conclusion

The Board of Directors are asked to note progress to date and the positive position regarding the Nursing and AHP Workforce. Much cross Trust collaboration is now being undertaken to use the learning from this work to inform developments and action planning in relation to the challenges associated with ongoing staffing and recruitment.