

|  |  |
| --- | --- |
| **Committee Name:** | **Quality & Performance Committee** |
| **Title of Report:** | **Safer Staffing Report (incorporating skill mix review)** |
| **Date of Meeting:**  | **18th December 2024** |
| **Executive Lead:** | **Sarah Rushbrooke, Executive Director of Nursing, Therapies & Quality Assurance** |
| **Report Author:** | **Liz Hanley, Associate Director Nursing & Quality** |
| **Agenda Item Number:** | **8.2** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Action Required:**  | **Note**  | **Assurance** | **Discussion** | **Decision** |
| **☐** | **✓** | **☐** | **☐** |

|  |
| --- |
| **Strategic ambitions this paper supports:**  |
| **1. Quality care, every day**  | ✓ |
| **2. Person-led care, when and where it is needed**  | **☐** |
| **3. A great place to work**  | **☐** |
| **4. Sustainable for the long term, innovating every day**  | **☐** |
| **5. Working with and for our communities**  | **☐** |

|  |  |  |
| --- | --- | --- |
| **Committee / Meetings where this item has been considered**  |  | **Management meetings where this item has been considered**  |
| Audit | **☐** |  | Business Delivery Group – Finance  | **☐** |
| CEDAR Programme Board | **☐** |  | Business Delivery Group – Quality and Performance | **☐** |
| Charitable Funds Committee | **☐** |  | Business Delivery Group - Risk | **☐** |
| Mental Health Legislation | **☐** |  | Business Delivery Group - Workforce | **☐** |
| People  | **☐** |  | Executive Management Group | **☐** |
| Quality and Performance | **☐** |  | Local Operational Management Group | **☐** |
| Resource and Business Assurance | **☐** |  | Trust-wide Safety Group | **☐** |
| Remuneration  | **☐** |  |  |  |
| Other/external (please specify) | **☐** |  |  |  |

|  |
| --- |
| **Does the report impact on any of the following areas *(please check the box and provide detail in the body of the report)*** |
| Commercial | **☐** | Finance / Value for Money | **☐** |
| Compliance / Regulatory | ✓ | Quality, Safety and Experience  | ✓ |
| Environmental | **☐** | Service user, carer and stakeholder involvement | **☐** |
| Equality, diversity and Inclusion | **☐** | System-wide Impact | **☐** |
| Estates and Facilities | **☐** | Workforce | ✓ |



|  |
| --- |
| **Board Assurance Framework/Corporate Risk Register risks this paper relates to:** |
| SA1 Working together with service users and carers we will provide excellent care. Supporting people on their personal journey to wellbeing.There is a risk that high quality, evidence based safe services will not be provided if there are difficulties accessing inpatient services in a timely manner due to bed pressures resulting in the inability to sufficiently respond to demands (SA1.4).SA4 The Trust’s mental health and disability services will be sustainable and deliver real value to the people who use them.A failure to develop flexible robust Community mental health services may well lead to quality and service failures which could impact on the people we serve and cause reputational harm (SA4). |

**Report to the Quality and Performance Committee**

**18th December 2024 (October 2024 data)**

**Safer Staffing Report**

**Executive Summary**

The purpose of the report is to provide assurance on the position across all in-patient wards within CNTW, in accordance with the National Quality Board (NQB) Safer Staffing Requirements. There is also a requirement to provide Care Hours Per Patient Day (CHPPD) planned and actual for registered and unregistered nursing via Unify monthly. The narrative in the report reflects the staffing position for October 2024.

Safer Staffing issues to note

The following safer staffing issues are of note:

* The overall experience and support needs of registered nurse staffing will continue to be monitored and experienced registered nurses will be rostered to provide ‘in charge’ cover. The most recent Mental Health Optimal Staffing Tool (MHOST) audit is being evaluated and provides evidence of the proportion of registered nurses in staffing establishments, as compared with the recommended proportion, based on patient acuity and dependence, in the context of professional judgement.
* Registered Nurse Degree Apprentices qualifying in January 2025 have been appointed to vacancies and MSc registered nurses who will be qualifying early in 2025 are currently being recruited.
* The winter Influenza and Covid-19 vaccination campaign is in progress for patients and staff, which impacts on registered nurse staffing.
* High acuity and complexity of patient need continues, with a high level of observation and engagement and seclusion.
* Physical health needs, including frailty and palliative care needs, require additional staffing resource (South and North Inpatient CBU); the requirement for staff to escort patients off-site to receive diagnosis and/ or treatment continues.
* The Enhanced Multidisciplinary Team model is being implemented in Acute Inpatient services, including Occupational Therapy in the first instance.
* Standalone units continue to be identified as being at increased risk of the effects of staffing pressures, including Yewdale ward; Elm House; Rose Lodge; Lotus ward and the Mitford unit.

Staffing related improvements include:

* A range of support and improvement work continues on the Mitford Unit and Rose Lodge.
* The continued implementation of the e-Rostering system (Allocate) enables staffing information to be monitored ‘at-a-glance’ and prospectively where this is in operation. A detailed audit of the implementation of Allocate and the related operational issues and barriers has been undertaken via the e-Rostering Board, with the aim of ensuring that the significant functionality of the system is fully understood and utilised throughout the Trust.

Implementation of safer staffing tools

As identified above, the latest Mental Health Optimal Staffing Tool (MHOST) exercise was completed in May 2024 and the initial information has now been reviewed and validated with Associate Nurse Directors (ANDs) and Clinical Managers (CMs). Individual ward summaries are being collated and will be shared with the relevant Group Nurse Directors (GNDs), ANDs, CMs and Ward Managers. Strategic highlights from the Trust-wide information include:

* Registered Nursing staff ratios across all except two wards (Gibside and Ward 31A) are lower than the MHOST recommended levels.
* Patient Acuity and dependency is high, particularly in North Inpatient CBU.
* The level of observation and engagement remains high across adult admission wards, which is consistent with previous MHOST audits.

NHSE training on the use of the Safer Nursing Care Tool (SNCT) has been facilitated by the Strategic Staffing Lead for the relevant Nursing Leaders at Walkergate Park Hospital.

**Risks and mitigations associated with the report**

Risks and mitigations are summarised in the narrative pages of the attached safer staffing report.

**Recommendation/summary**

It is recommended that the Quality and Performance Committee receives this report meeting the regulatory requirements for reporting of staffing levels and acknowledges the areas highlighted for increased scrutiny and those areas of improvement noted for assurance.

**Name of author**

Liz Hanley

Associate Director Nursing and Quality

**Executive Lead**

Sarah Rushbrooke

Executive Director Nursing, Therapies and Quality Assurance