A close-up of a logo

Description automatically generated

|  |  |
| --- | --- |
| **Committee Name:** | **Quality & Performance Committee** |
| **Title of Report:** | **Safer Staffing Report (incorporating skill mix review)** |
| **Date of Meeting:** | **29th January 2025** |
| **Executive Lead:** | **Sarah Rushbrooke, Executive Director of Nursing, Therapies & Quality Assurance** |
| **Report Author:** | **Liz Hanley, Associate Director Nursing & Quality** |
| **Agenda Item Number:** | **7.2** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **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**

**29th January 2025 (November 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 November 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.
* Eighteen newly registered nurses (MSc and BSc) have been appointed to vacancies and will take up post in January 2025.
* The winter Influenza and Covid-19 vaccination campaign is in progress for patients and staff, which continues to impact 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.
* Prolonged outreach support to care homes to enable leave arrangements or timely discharge contributes to staffing pressures.
* The impact of sickness, restrictions to duties whilst investigations are completed and maternity leave.
* The Enhanced Multidisciplinary Team model is being implemented in Acute Inpatient services, incorporating Occupational Therapy. Planning with other professions is in progress.
* 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 e-Rostering system (Allocate) enables staffing information to be monitored ‘at-a-glance’ and prospectively where this is in operation. Work continues to address operational issues and barriers via the e-Rostering Board, as implementation continues.

Implementation of safer staffing tools

* NHSE has delivered training to senior staff at Walkergate Park on the Safer Nursing Care Tool and this has resulted in Training for Trainer status approval by NHSE.
* As reported previously, review of the Mental Health Optimal Staffing Tool data has identified low ratios of Registered Staff to Non-Registered Staff. The plan for the six- monthly review of staffing establishments and the related training is being finalised.
* The NHSE Safer Staffing Gap analysis is in the process of being completed, in preparation for discussion with NHSE, with respect to safer staffing reporting and assurance.

**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