



Quality Committee

Agenda Item	QC024/15	Date: 09/04/2015
Report Title	Safer Staffing	
FOIA Exemption	No Exemption	
Prepared by	Tracy Fennell, Associate Director of Nursing	
Presented by	Janet Thomas, Deputy Director of Nursing	
Action required	Discussion	
Supporting Executive Director	Executive Director of Nursing	

PURPOSE OF THE REPORT:

Report purpose	<p>To provide assurance to the Board:</p> <ul style="list-style-type: none"> • That the contents of this paper relating to Safer Staffing are reported as per National Directives • That project plans are in place and remain on target to improve the quality of data/dashboards to inform the correlation between staffing deviances and patient outcomes • That work is progressing and remains on target to ensure that Safer Staffing models are further developed and implemented to ensure that care remains safe and of good quality • That Safer Inpatient Staffing reporting requirements for February 2015 have been met • That the Safer Staffing Group has a clear remit and action plan which is on target • That issues outlined are accounted by the Networks and action plans are in place to address patient safety issues and recruitment shortfalls, these are being monitored and supported as part of the Safer Staffing agenda.
Strategic Objective(s) this work supports	To provide high quality services
Board Assurance Framework risk	4.2 The Trust fails to staff to agreed staffing levels, to take account of fluctuating activity and absence levels over above funded posts.
CQC domain	Safe

PAPER DEVELOPMENT PROCESS:

Meeting	Presented	Action	Date



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1.0 Introduction

There are well evidenced links between patient outcomes and whether organisations have the right people with the right skills, in the right place at the right time. Research demonstrates that staffing levels are linked to the safety of care and that staff shortfalls increase the risk of patient harm. In March 2014, the Chief Nursing Officer for England and the Chief Inspector of Hospitals jointly wrote to all Chief Executives of Trusts providing clear guidance on the delivery of the “Hard Truths Commitments” and in particular the requirement to publish staffing data regarding nursing, midwifery and care staff.

Evidence also shows poorly staffed wards increase staff sickness, burnout and reduce staff well-being which are all known to have direct consequence on outcomes of care, including patient experience. However, it must be noted safe wards are not exclusively attributed to staffing numbers. Other factors include strong empowered leadership at ward level, resources directed at supporting ward leaders and the development and use of clinical and patient metrics to name just a few.

Responses to Francis, Keogh and Berwick

In November 2012, National Quality Board issued guidance to optimise staffing capacity and capability in “How to Ensure the Right People with the Right Skills, are in the Right Place at the Right Time – a Guide to Nursing, Midwifery and Care Staffing Capacity and Capability”.

The Government also made a number of commitments in “Hard Truths: The Journey to Putting Patients First” (January 2014). One commitment was to make information on how hospitals are being run publically available. Specifically this included a commitment to publish staff data (in the public domain) from April and at the latest by the end of June 2014.

New Board Responsibilities for Ensuring Safer Staffing is in place

Trust Boards are required to take full responsibility for the quality of care provided to patients and as a key determinant of quality, take full and collective responsibility for nursing, midwifery and care staffing capacity and capability. For Lancashire Care Foundation Trust (LCFT) it is agreed monthly briefings/assurance will be presented to the Quality and Safety Sub-committee and quarterly papers will be seen by Trust Board. In addition, Trust Board will receive a six monthly Executive Director of Nursing report providing a detailed review of all factors relating to safer staffing.

2.0 February 2015 Safer Staffing Data

Children and Families

Both wards have maintained fill rates above 100% as in previous months for both unqualified and qualified shift rates, occupancy rates are above 89% on both wards. Bank usage remains low with one remaining staff vacancy that is currently being recruited to. Sickness and absence has reduced to 0.48%.

Secure Services

There is an improvement on all secure wards staff fill rates. In January all areas were noted to have registered staffing levels between 40% - 75% during day shifts, this had remained static over previous months. Significant improvements show in February. All wards maintained fill rates above 81% and predominantly above 100% for both trained and untrained shifts. These improvements are attributed to the decision to over recruit to current establishments. Over recruiting decisions were taken based on

experiential knowledge from previous recruitment drives. Previous recruitment has led to non-resolved staffing pressures due to large numbers of nurses accepting posts then withdrawing prior to start dates. During latest recruiting drives to Secure Services 15 nurses have withdrawn from employment offers leaving Secure Services at their baseline establishments as predicted. However, the use of Bank staff to cover sickness and absence has increased slightly to 7.19% across the site. This is not attributed to any common cause. Sickness monitoring measures are in place.

Adult Community

In Adult Community, Harbour recruitment initiatives have seen significant improvements in qualified and unqualified fill rates that were noted as low as 33% in some areas in January. Figures for February have shown figures above 95% and as high as 94% on some shifts. This has been in place to allow effective induction and training processes to take place prior to the Harbour opening dates. Occupancy has remained high above 95%. Improvements in sickness monitoring processes have shown a significant reduction in sickness and absence from 12.7% in October 2014 to 7.5% still attributed to no common cause.

Adult Mental Health

Adult Mental Health has shown a general improvement in registered nurse day shift fill rates compared with last month. In January, 13 areas had shown poor registered fill rates as low as 53%, 5 areas are still reporting low registered day fill rates between 54% and 68%. There has been a notable improvement in night duty registered fill rates with all areas reporting registered and unregistered fill rates above than 80%. This again is believed to be due to the Harbour recruitment initiatives. High levels of sickness and absence (around 15%) have caused increased pressure on Healy, Conway and Lathom wards juxtaposed with high levels of acuity, throughput and full bed occupancy. However, across Adult Mental Health there has been a noted improvement in sickness and absence figures from 10.6% in December 2014 to 7.1% in February 2015. However, despite improvements in staffing in most areas, pressures continue to be reported across the wards due to high throughput, high acuity and high occupancy this is reflected through the higher than average number of patient safety incidents. Themes are being identified and will be targeted through the Adult Mental Health Clinical Improvement Action Plan.

3.0 Safer Staffing Update

As part of the Safer Staffing Group project plan, the vacancy position across all inpatient wards is being monitored and facilitated as a priority by Workforce functions to enable speedy recruitment. Vacancies are noted to have decreased significantly following successful recruitment drives at Guild and the Harbour. However, presently pressure has been identified across some services linked to nurses accepting a number of positions in a variety of Trusts then withdrawing from employment offers prior to commencement. This is currently successfully being managed in some areas by over recruiting processes.

Additional pressures are noted through retention difficulties believed to be attributed to junior staff struggling to manage high acuity and throughput in some of the more challenging wards. Improved preceptor ship processes are being developed to provide additional support to newly qualified nurses to aid retention in the future workforce. Further work is also ongoing as part of the Safer Staffing agenda with Workforce to understand factors that influence staff retention.

4.0 Temporary Staffing

Temporary staffing continues to report difficulties in meeting demands for registered nurses and report approximately 80% of shifts are still being downgraded to band three shifts due to inability to cover. A dedicated recruitment team is leading to significantly increase the number of Bank staff recruited. Since



August 2014, 121 additional staff have been recruited that have filled 5,467 shifts to date. Delays were noted in the availability of Mandatory training for Bank staff and delays in DBS checks. However, corrective actions are now in place and mandatory training for Bank staff is being planned for the forthcoming months. These actions will ensure 100% of Bank staff recruited after October 2014 will be fully compliant with Mandatory training before they start work. Regular scheduled adverts continue on the NHS website to facilitate speedy and ongoing recruitment. A full data cleanse of Bank systems is ongoing to identify active workers and remove staff who are no longer active. This has led to an increased number of staff taking up shifts again further reducing the use of agency staff.

5.0 Electronic Roster System

The Health Roster v10 is now fully operational across clinical settings allowing the smooth transition from the temporary Bank Staff Management System (BSMS) to the new Bank Staff System. The new system will facilitate speedy Bank staff requests and enable efficient booking and monitoring of Bank use by 31st March 2015. In addition, going forward the safer staffing UNIFY data can be produced accurately from a single system.

The 'pilot' implementation of the Health Roster Safe Care module continue at the Platform and Junction. This will give the Executive Director of Nursing and Network Senior Nurses visibility of staffing levels across wards and departments allowing them to make more informed decisions to maintain safe and compliant care based on patient numbers and acuity.

6.0 Quality Dashboards

Newly developed dashboards are now available and are being further developed that enable the correlation of useful data relating to patient safety issues and harms juxtaposed with Workforce and Finance data to inform decisions around the Safer Staffing agenda moving forward. These will assist with judgements to identify if current establishments support safe care.

7.0 Conclusion

The following assurances are given to the Quality Committee:

- Receive assurance that the contents of this paper relating to Safer Staffing are reported as per National Directives
- Receive assurances that there has been a significant improvement in the reduction of vacancies across the Trust due to a number of successful recruitment drives
- Receive assurance that work is progressing and remains on target to ensure that Safer Staffing models are further developed and implemented to ensure that care remains safe and of good quality
- Work is underway to ensure robust escalation processes are in place for highlighting and alleviating staffing concerns across in patient services
- Receive assurance safer inpatient staffing reporting requirements for March 2015 have been met
- The Safer Staffing Group has a clear remit and newly developed project plan with significant progress being made on a number of work streams
- Issues outlined are accounted by the Networks and action plans are in place to address patient safety issues and recruitment shortfalls, these are being monitored and supported as part of the Safer Staffing agenda.

Appendix 1: Safer Staffing Action Plan			Action Plan Lead:	Action Plan Review Date:	
			Tracy Fennell (TF)	18 th April 2015	
Results	Approach		Deployment		Assessment and Review
Objective	Action Required (reference to detail)	Action Lead Responsibility	Action Implementation Strategy (reference to detail)	S – Start TC – Target completion R – Review C – Completion date	Progress (reference to detail)
Review establishments for Mental Health wards/ Secure / Older Adult and Longridge ward	<ul style="list-style-type: none"> Understand current establishments/ models 	Tracy Fennell	TF to liaise with Finance Lead to receive accurate: <ul style="list-style-type: none"> Monthly budgeted establishments Monthly Recruited against establishment Models for current agreed establishments Identify any additional budgets funded for staffing e.g. acuity/ additional beds etc/ how this has been utilised. Identify shift models for each ward 2 shift / 3 shift. 	C - March 15	Agreed by finance, baseline to commence April 15 then to receive monthly ongoing before the 14 th of each month.

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		Network Leads	<ul style="list-style-type: none"> To identify if current model per ward in line with best practice / researched staffing models, identify any potential inconsistencies/ potential risk factors identified through reliable data / intelligence Develop intelligence via dashboards, staff survey; benchmarks where establishments are believe to be affecting safety. Liaise with finance partners to review if establishments can be modified to support agreed safer staffing 	TC - August 2015 TC - August 2015 TC - September 2015	Await detailed finance reports to commence, Leads asked to research clinical staffing models Await safe staffing model to be agreed for each ward Await safe staffing model to be agreed for each ward

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			<ul style="list-style-type: none"> model. Where budgets not appropriate to fund safe staffing model, agree secondary action with Network Director / Clinical Network Director Network Leads to provide monthly update to Safer Staffing meeting. 	TC - September 2015	
To ensure Safer staffing assurance meeting scheduled and communicated for the year	<ul style="list-style-type: none"> To ensure years calendar scheduled in line with inflowing reports for dashboards / outgoing reporting requirements 	Sue Mighri	<ul style="list-style-type: none"> To identify and diary to TF reporting schedule / dates for submission dates for papers to Public Board / Quality and Safety Sub-committee. To arrange and communicate schedule of 	C - April 15	Dates identified and circulated

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			dates to all members.		
Review establishments for Community teams	<ul style="list-style-type: none"> Understand current establishments/ models 	Rachel Sagar/ Lyn Bax	To liaise with Finance Lead to receive accurate <ul style="list-style-type: none"> Monthly budgeted establishments Monthly Recruited against establishment Models for current agreed establishments Identify any additional budgets funded for staffing e.g. acuity/ additional beds etc/ how this has been utilised. Identify shift models for each ward 2 shift / 3 shift. 	TBA at Safer Staffing meeting - April	

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Review establishments for prison healthcare services	Understand current establishments/ models	Claire Riding/ Sandra Hands	To liaise with Finance Lead to receive accurate <ul style="list-style-type: none"> • Monthly budgeted establishments • Monthly Recruited against establishment • Models for current agreed establishments • Identify any additional budgets funded for staffing e.g. acuity/ additional beds etc/ how this has been utilised. • Identify shift models for each ward 2 shift / 3 shift. 	TBA at Safer Staffing meeting - April	
Development of detailed dashboards	To utilise a wider range of accurate data to enable	Tracy Fennell	<ul style="list-style-type: none"> • Liaise with Rachel Monaghan to agree safer staffing data lead 	C - February 2015	Rosemary Yates to send monthly data on

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	improved understanding of patient outcomes/ safety issues juxtaposed with occupancy / throughput etc	Rachel Lees Janet Makinson	support <ul style="list-style-type: none"> TF to liaise with Finance to agree receipt bank and agency breakdown / trends from last 12 months / month on month moving forward To liaise with Janet Makinson to develop visuals re dash boards To Develop visuals to support effective dashboards utilising Datix 	C - March 2015 C - February 2015 TC - May 2015	Sickness and absence / trends. Costs / occupancy. Ongoing since Feb. 15 To commence monthly from April, additional back data to be received in May Temporary spreadsheets in use analyse data until visuals

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			<ul style="list-style-type: none"> TF to present Dashboard options at April Safer Staffing meeting 		available
Reduction of bank and agency use	To reduce of bank and agency staff required , promoting development of a sustainable competent workforce	Emma Forsyth Emma Forsyth	<ul style="list-style-type: none"> Jane Seddon / Paul Guy to present overarching project themes to safer staffing group for consultation / approval TF / EF to meet to agree priorities detailed action plan aligned to safer staffing agenda EF to present detailed action/ project plan to safer staffing group May 2015 	C - March 2015 TC -early April 15 TC - May 15	Completed March 15 principles agreed to be in line with safer staffing agenda Meeting planned for early April Not yet commenced

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		Tracy Fennell/ Emma Forsyth	<ul style="list-style-type: none"> Ongoing monitoring against action plan / project plan at monthly safer staffing assurance group Identification of working party to support bank and agency reduction 	TC - to be agreed TC - April 2015	Safer staffing representatives identified, EF to identify other stakeholders
Enable effective Recruitment	Enable effective recruitment strategies to enable internal competent sustainable workforce	Emma Forsyth	<ul style="list-style-type: none"> Jane Seddon / Paul Guy to present overarching project themes to safer staffing group for consultation / approval TF / EF to meet to agree priorities detailed action plan 	C - March 2015 TC - early April 15	Completed March 15 principles agreed to be in line with safer staffing agenda Meeting planned for early April

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		Tracy Fennell	<ul style="list-style-type: none"> aligned to safer staffing agenda • EF to present detailed action/ project plan to safer staffing group May 2015 • Ongoing monitoring against action plan / project plan at monthly safer staffing assurance group • Identification of working party to support bank and agency reduction • To liaise with Network Directors to agree involvement with RCN jobs fairs moving forward 	TC - May 2015 TC - May 2015 TC - from June 2015 TC - April 2015	Not yet commenced As above Safer staffing reps identified, EF to identify other stakeholders All Networks to be involved

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			<ul style="list-style-type: none"> To agree action leads for forthcoming event at April safer staffing meeting 	TC – April 2015	
Enable fill rates for requested bank shifts	To ensure adequate bank staff available to cover requested bank shifts	Wendy Simpson Tracy Fennell/ Lee Holmes/ Wendy Simpson W Simpson/ Lee Holmes	<ul style="list-style-type: none"> WS to present detailed action/ project plan to safer staffing group May 2015 Identify funding to recruit practice trainer to enable ongoing mandatory training requirements Request to recruit / interview / recruit To identify mandatory training plan to address non-compliance with 	TC - May 2015 C – February 2015 C – March 2015 TC - May 2015	Complete, trainer recruited not yet commenced in post , LH identifying interim support for training gaps

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			mandatory training updates		
Electronic roster / Bank staff	To ensure full effective roll out of E roistering / bank staff to enable effective roistering / accurate data to be produced from one system	Damian Sheeran	<ul style="list-style-type: none"> DS to present detailed action/ project plan to safer staffing group April 2015 to include monitoring / support of effective use of health roster by all teams To provide monthly update to safer staffing assurance group DS to provide assurance re roll out of Bank system training / use by all wards 	TC - April 2015 TC - 31 st March 2015	E rostering roll out on target to be in place by 1 st May 2015. Bank staff system roll to commence 1 st April 2015 Assurance received across organisation with the exception of 2 harbour wards and 3 guild wards

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			<ul style="list-style-type: none"> Implementation of safe care module pilot DS to liaise with IT to source Ipad's to support project Roll out of safe care module action plan to be presented at April meeting 	TC - March/ April 2015 TC – April 2015	
Escalation processes	To ensure robust systems in place to enable all staff to effectively raise concerns relating to staffing	Network Professional Leads	<ul style="list-style-type: none"> CR/ KB to communicate and implement agreed Network escalation process RS/MK to apply final modifications then communicate and implement agreed Network escalation process 	TC - April 2015	Secure/ Adult Mental Health escalation processes agreed and being rolled out. Minor amendments required for C&F and Adult Community

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			<ul style="list-style-type: none"> SK to review communicate and implement agreed network escalation process for harbour Network Leads to provide update to April safer staffing meeting To review and amend Network SOPs to reflect Network escalation processes 	TC - April 2015 TC - May 2015 TC - End May 2015	
Identification of Headroom	To ensure headroom agreed to support essential training , maternity / sickness / professional development opportunities	Tracy Fennell	TF to liaise with Finance Lead to receive accurate <ul style="list-style-type: none"> Monthly budgeted establishments / identified current headroom Models for current agreed 	TC - May 2015	

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		Network Leads	headroom within establishments <ul style="list-style-type: none"> To identify if current model per ward in line with current requirements , identify any potential inconsistencies To review benchmarks within other similar organisations Liaise with finance partners to review if establishments can be modified to support agreed safer staffing model. Where budgets not appropriate to fund safe staffing model , agree secondary action with 	TC - June 2015	

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			Network Director / Clinical Network Director		
Potential recruitment of pool staff where identified	To support flexible deployment of staff to wards experiencing safety issues relating to staffing. Enabling quality interventions / reducing risk for patients.	Tracy Fennell Network Leads	<ul style="list-style-type: none"> Identify any additional budgets funded for staffing e.g. acuity/ additional beds etc/ how this has been utilised. To identify if current model per ward in line with current requirements, identify any potential inconsistencies To review benchmarks within other similar organisations Liaise with finance partners to review if establishments can be 		

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			modified to support agreed safer staffing model. <ul style="list-style-type: none"> Where budgets not appropriate to fund safe staffing model , agree secondary action with Network Director / Clinical Network Director 		
Implementation of safer wards	To implement and fully embed principles for safer wards initiatives / clinical interventions to reduce acuity improve quality of interventions on inpatient wards	Network Leads	<ul style="list-style-type: none"> Network Leads to provide monthly progress report to safer staffing group AMH to provide relaunch across Network of safe wards in March 2015 	TC - July 2015	On target
Delivery of competency based model linked with revalidation	To agree competency model / development programme for all	Rachael Mitchell	<ul style="list-style-type: none"> Meeting to agree action plan for education and training to support safer 	TC – May 2015	Meeting planned

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	bands in line with revalidation to support competent and effective workforce who deliver quality care		<ul style="list-style-type: none"> staffing agenda RM to present action plan at June safer staffing meeting 	TC – June 2015	Longer term action plan to be agreed
To align Quality initiatives to Safer staffing agenda	To review current quality measures / intelligence and identify how these can support review of safe wards in relation to staffing	Anne Allison	<ul style="list-style-type: none"> AA to review current reporting mechanisms i.e. SEEL , quality dashboards and how two projects can be aligned to enable lean translation of information AA to present thoughts at May safer staffing Action plan to be agreed to align projects 	TC - April 2015 TC - May 2015 TC - present June	Had conversation in February but quality dashboards not low level enough at that time to provide useful intelligence, planned ongoing review to ensure projects remained aligned.
To ensure workforce action plan relating to	To agree a shared direction supporting the	Tracy fennel / Emma	<ul style="list-style-type: none"> Meeting TF / EF to identify and agree shared 	TC - April	Meeting arranged early April

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staff survey/ ESR supports accurate reporting requirements	needs of the organisation / national requirements aligning workforce and safer staffing / quality initiatives	Forsyth	objectives and identified leads moving forward <ul style="list-style-type: none"> • EF to present as part of the workforce action plan to the May safer staffing group • EF to provide monthly updates against action plan to safer staffing group 	TC May	