

Borders NHS Board



NURSING AND MIDWIFERY WORKLOAD AND WORKFORCE PLANNING ANNUAL REPORT

Aim

The aim of this annual report is to assure the Board that NHS Borders has appropriate levels of nursing and midwifery staff with the necessary skills to deliver Safe, Effective and Person Centred Care.

This paper will update the Board on progress against the local Project Plan for 2014/15 to deliver the requirements laid out within the revised Guidance (October 2012) for the development of Board Local Delivery Plans (LDP) and the Scottish Government CEL32(2011). Revised Workforce Planning Guidance for NHS Boards as of April 2013 mandates nursing projections are developed with consideration to the application of a suit of Nursing and Midwifery Workload and Workforce Planning (NMWWP) tools where available.

This paper also identifies areas of learning from the first year of having a structured approach to NWNWP. Finally, the paper lays out the plan for 2015/16.

Background

“The importance of appropriate staffing was reinforced by the Francis Report into failings at Mid Staffordshire NHS Foundation Trust in England. Appropriate staffing plays an important part in the delivery of safe and effective health and care. Safe staffing can be a complex area and has to take account of multiple factors. It must be matched to patients’ needs and is about skill-mix as well as numbers, about other staff as well as nurses, and other settings as well as hospitals. It is the responsibility of health and care providers, which are regulated by system regulators in the four countries of the UK.”

(NMC briefing: June 2015 Appropriate staffing in health and care settings)

All NHS Boards in Scotland are provided with a consistent framework to support evidence based workload and workforce planning allowing the Chief Executive to ensure that professional validated workforce measurement tools are used in deriving the appropriate levels of nursing in each clinical area. The tools are a triangulated approach incorporating:

- Workload and Workforce Planning tool - a system that sits within SSTS used to enter information such as total number of beds, number of beds occupied and staffing levels.
- Professional Judgement - method of capturing information based on professional opinion such as; where activity occurred, whether activity was planned/unplanned, start/end time, description of additional activity, number of staff involved and levels of care required.

- Quality Measures - Clinical Quality Indicators (CQIs) are evidence based indicators that support the measurement of the quality, safety and reliability of care. The CQIs focus on quality improvement rather than a measure of performance. They are used in NHS Borders as a mixture of process, balancing and outcome measure.

Together, the triangulated approach uses rigorous statistical analysis to calculate the whole time equivalent (WTE) nursing staff required for the current workload.

There are currently 12 tools available for use and apply to Emergency Departments, Theatres, Mental Health, Neonatal, Midwifery, Children's Services and Specialist Nurses. Appendix 1 provides details of the entire suite.

NHS Borders Board was presented with a local plan of activity in 2014/15. Appendix 1 reflects progress to date.

Lessons learned from 2014/15 Implementation plan

It is acknowledged that the NMWWP tools used throughout 2014/15 were in their infancy and under ongoing national development. It was intended for the tools to offer a consistent framework in which to inform decision making and contribute to assurance that safe nursing and midwifery staffing levels were in place. On analysing our application and interpretation of data from the tools, two fundamental areas of improvement for 2015/16 have been identified.

1. It is essential that the SSTS platform tools are applied at the same time as Professional Judgement. This was not done with consistency and is reflective of practice throughout Scotland. This will be rectified in 2015/16.
2. In order to build capacity, knowledge and ownership of the tools, it is essential that a process of clinical discussion and feedback to SCN's and Managers is established early following analysis and conclusion from the application of the tools. This is factored into the Plan for 2015/16.

Plan for 2015/16

The 2015/16 Implementation Plan (Appendix 2) sets out a rolling programme for the application of the NMWWP tools. Additional activity is included to ensure appropriate feedback is provided to the clinical areas including professional discussion around implications for alternative staffing arrangements, formulation of business plans and recommendations to the Clinical Executive Strategy or Operational Groups.

This will further ensure transparency of decision making regarding safe staffing levels across the establishment and ensure an appropriate and timely response is evident where staffing levels are identified as requiring adjustment.

Summary

NHS Borders acknowledges that there is an aging workforce and that this may have implications for future staffing levels. To ensure this issue is considered we will analyse the current workforce profile and build in a rolling plan of continuous monitoring and reaction.

It is noted that although there is a planned schedule to run the tools, priority areas may arise and that the tools may be applied at any time if circumstances change within any of the clinical areas. An agreed escalation process is currently in place to raise concerns regarding safe levels of cover within each of the Clinical Boards.

The Executive Nurse Director will provide leadership but it is essential that others are fully engaged in the process as the final decision on funded establishments will be taken by the Executive Nurse Director, the Chief Executive and the Director of Finance.

The Executive Nurse Director will increase reporting to the Board and provide a twice yearly report on the findings and outcomes from the application of the tools and the agreed funded nursing establishments in place across all Clinical Areas within NHS Borders.

NHS Borders will continue to review nursing and midwifery staffing levels by evaluating actual WTE against need as per the analysis of information produced from the triangulated approach in relation to NMWWP tools.

In December 2015 we will report on all tools applied up to September 2015.

Recommendation

The Board is asked to **note** the Annual Report from 2014/15, **note** the proposed activity in relation to the plan for 2015/16 and **agree** the proposal for 6 monthly reporting of progress against the plan.

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| Policy/Strategy Implications | As detailed within the paper. |
| Consultation | - |
| Consultation with Professional Committees | The 2015/16 plan is developed through engagement with the workforce and Partnership. |
| Risk Assessment | As detailed within the paper. |
| Compliance with Board Policy requirements on Equality and Diversity | Compliant |
| Resource/Staffing Implications | As detailed within the paper. |

Approved by

| Name | Designation | Name | Designation |
|---------------|---------------------------------|-------------|--------------------|
| Evelyn Rodger | Director of Nursing & Midwifery | | |

Author(s)

| Name | Designation | Name | Designation |
|---------------|--|-------------|--------------------|
| David Thomson | Associate Director of Nursing, Mental Health | | |

Appendix 1

Local progress against NHS Borders Nursing & Midwifery Workload and Workforce Planning planned activity 2014/15:

| Start Date of Local Roll Out | Workload Tool | Outcome Report Deadline | Outcomes Reported to | Progress Update |
|------------------------------|-----------------------------|-------------------------|---|---|
| April 2014 | Mental Health Workload Tool | June 2014 | Clinical Board, Director of Nursing & Midwifery and the Chief Operating Officer | <p>Tools were applied as per planned schedule in the following areas:</p> <p>Melburn Lodge The analysis of information identified that the funded establishment of Melburn Lodge provides safe staffing levels with no change required. Locally the Senior Charge Nurse supported patient dependency by making adjustments in skill mix. It is noted funded establishment is supplemented by Bank Nurses as required to support unexpected changes in patient dependency</p> <p>Cauldshiels Cauldshiels Following triangulation, the analysis of information identified that funded establishment of Cauldshiels provides safe staffing levels. Extreme high dependency levels were reported at the time of analysis. Staffing levels have since been adjusted to support the connected ward, Lindean reducing need for supplementary staff.</p> <p>Lindean The analysis of information identified that the funded establishment of Lindean provides safe staffing levels. The calculator combines information for Cauldshiels and Lindean wards resulting in clinical discussion concluding safe provision of staff in relation to patient dependency).</p> |

| Start Date of Local Roll Out | Workload Tool | Outcome Report Deadline | Outcomes Reported to | Progress Update |
|------------------------------|--------------------------|-------------------------|---|---|
| | | | | <p>East Brig The analysis of information identified that the funded establishment of East Brig provides safe staffing levels. As a result of this analysis the Senior Charge Nurse and the local Management Team were supported in making an informed decision to cease use of supplementary staff.</p> <p>Huntlyburn Following triangulation, the analysis of information identified that funded establishment of Huntlyburn provides safe staffing levels.</p> |
| April 2014 | Community Maternity Tool | June 2014 | Clinical Board, Director of Nursing & Midwifery and the Chief Operating Officer | Tools were applied as per planned schedule. The analysis of information identified that the funded establishment of the service provides safe staffing levels. |
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| May 2014 | Peri-Operative Tool | July 2014 | Clinical Board, Director of Nursing & Midwifery and the Chief Operating Officer | Tools were applied as per planned schedule. On advice from the National Workload and Workforce Planning Team, the data produced from this run is not provided as it has been identified that there is an error in the report functionality within SSTS. Assurance is given that safe staffing levels are provided following a local professional judgement review. It is identified that there is a need for additional anaesthetic proficient operatives. Theatres are safely supported by use of supplementary staff. The Management Team and the Director of Nursing are currently reviewing the Workforce and Training Plans for this area. |

| Start Date of Local Roll Out | Workload Tool | Outcome Report Deadline | Outcomes Reported to | Progress Update |
|------------------------------|--------------------------------|-------------------------|--|---|
| June 2014 | Community Workload Tool | August 2014 | Clinical Board, Director of Nursing & Midwifery and the Chief Operating Officer As above | Tools were applied as per planned schedule. The analysis of information identified that the funded establishment of the service provides safe staffing levels. The Community Workload Tool is different from the triangulated approach used in other tools. The tool helps look at clinical tasks performed, time to complete tasks and provides information about the establishment required to deliver the workload. Calculators to determine recommended WTE are being developed at national level and will be available in this financial year. |
| July 2014 | Maternity Workload Tool | September 2014 | Clinical Board, Director of Nursing & Midwifery and the Chief Operating Officer | Tools were applied as per planned schedule. The analysis of information identified that the funded establishment of the service provides safe staffing levels. Maternity services run the tools on a more frequent basis in line with the national approach. This approach is being tested and will inform further evidence of how tools in other clinical areas may be applied in the future. |
| August 2014 | Clinical Nurse Specialist Tool | October 2014 | Clinical Board, Director of Nursing & Midwifery and the Chief Operating Officer | Tools were applied as per planned schedule. No adjustments have been made and safe staffing levels are reported to be in place. There was uptake in applying the tool locally in the following clinical areas: Diabetes Chronic Pain Dementia Liaison Dermatology Gastro Intestinal Urology In 2015/16 tools will be applied to all Clinical Nurse specialists. |

| Start Date of Local Roll Out | Workload Tool | Outcome Report Deadline | Outcomes Reported to | Progress Update |
|-------------------------------------|---|--------------------------------|---|--|
| September 2014 | Adult Inpatient Tool | November 2014 | Clinical Board, Director of Nursing & Midwifery and the Chief Operating Officer | Tools were applied as per planned schedule. No adjustments have been made to staffing levels. The data provided shows anomalies which on investigation and in consultation with the national team, concludes that data was entered incorrectly to the system on occasions ie bed occupancy for some wards had been entered as a percentage and not as a number. This is a learning point for our service going forward and will be rectified in 2015/16. Safe staffing levels are evident as areas are supported with supplementary staff. |
| October 2014 | Small Wards Tool | December 2014 | Clinical Board, Director of Nursing & Midwifery and the Chief Operating Officer | NHS Borders did not apply the Small Wards Tools as NHS Borders do not have any clinical areas appropriate for its application. This tool has been removed from the 2015/16 plan. |
| November 2014 | Emergency Medicine Multi-Disciplinary Workload Tool | January 2014 | Clinical Board, Director of Nursing & Midwifery and the Chief Operating Officer | Tools were applied as per planned schedule however analysis of the information was not accurate due to an error in the national systems calculator. It is acknowledged that safe staffing levels were evident as funded establishment was supported by supplementary staff. |

Appendix 2

Nursing and Midwifery Workload and Workforce Planning Tool Review Plan 2015 – 16 (with dates from 2013-15)

Clarification of specific consecutive weeks will be agreed for all adult inpatient runs. Emergency Department, Theatres, Critical Care and BSU, Paediatrics and Maternity will be consulted about speciality tool use.

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| Proposed Run of Tool | ® |
| Analysis Completed | |
| Team review and Discussion | |
| Business Plan / recommendations to JET / BET | |

| Ward / Department | Tool(s) Used | Last Completed | Apr 2015 | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | Jan 2016 | Feb | Mar | | |
|----------------------|---|-----------------|----------|-----|-----|-----|-----|-----|-----|-----|-----|----------|-----|-----|--|--|
| Emergency Department | EMERGENCY DEPARTMENT / EMERGENCY MEDICINE | 12 – 25/01/2015 | | | | | | | | | | | | | | |
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| Ward 4 | ADULT INPATIENT / PROFESSIONAL JUDGEMENT | Nov 2014 | | | | | | | | | | | | | | |
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| Ward 12 | ADULT INPATIENT / PROFESSIONAL JUDGEMENT | Feb 2014 | | | | | | | | | | | | | | |
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| Ward 10 / DME | ADULT INPATIENT / PROFESSIONAL JUDGEMENT | Jun 2013 | | | | | | | | | | | | | | |
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| BSU / MKU | ADULT INPATIENT / | ? | | | | | | | | | | | | | | |
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