

Meeting Title	Board of Directors		
Date	10 March 2022	Agenda item	Bo.3.22.15

NURSING WORKFORCE BOARD ASSURANCE FRAMEWORK FEBRUARY 2022

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Purpose of the paper	To provide an overview and summary of nursing workforce safe staffing assurance.	
Key control	This paper is a key control for the strategic objective to provide outstanding care for patients.	
Action required	To note	
Previously discussed at/ informed by		
Previously approved at:	Academy/Group	Date
	People Academy	26.1.22
	People Academy PA.2.22.7	23.02.22

Key Options, Issues and Risks

Actions have been taken throughout the Covid-19 pandemic to ensure the safest nursing and midwifery staffing is in place in line with national guidance and advice from professional bodies and regulators. This paper provides an update on process and actions that have been put in place to ensure the Trust is implementing learning from previous covid waves and actions recommended by NHSE in its paper staffing assurance for winter 2021 have been implemented.

During January 2022 the risk assessment for safe staffing has been updated with a new assessment and updated risk added to the strategic risk register. This identifies the mitigation in relation to the risk of harm to patients, staff and visitors within planned and un-planned care due to the Trust's inability to maintain safe staffing levels as a result of the sustained Covid-19 pandemic; potentially resulting in, poor experiences of care, increased patient and staff dissatisfaction, complaints, incidents, increased sickness levels, claims, and a negative impact on the reputation and financial status of the Trust. The risk assessment can be seen in Appendix A.

In line with national guidance a Quality Impact Assessment in relation to safe staffing levels was also undertaken by the senior nursing team. This can be seen in Appendix B.

This paper provides an update on work that has been undertaken to ensure there is safe staffing during Winter 21/22 when it is anticipated that there will be an increase in patients requiring inpatient care and increased staff absence due to Covid 19. The paper details actions that have been taken against the key recommendations as published in the NHSE guidance paper November 2021: Winter 2021 preparedness: Nursing and midwifery safer staffing. https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2021/11/BW1068_Staffing-assurance-framework-for-winter-2021-preparedness_12112021.pdf which can be seen in Appendix C and D.

Trust board members are collectively responsible for workforce planning, practice and safeguards. The guidance paper outlines a number of recommended actions under a framework for ensuring preparedness, decision making and escalation processes necessary for ensuring safer nursing and midwifery staffing as the winter period approaches. The actions are designed to ensure there is ward to

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board oversight of the risks and mitigations in place to ensure safe staffing. Many actions have been undertaken at previous Covid 19 waves to ensure safer staffing and learning from these has been incorporated into our approach to planning.

Analysis

The fill rates for November and December 2021 and January 2022 are shown below. The data for December was manually checked to ensure the accuracy of the reporting during this time period due to the frequent movement of staff across the clinical areas. There is a sustained reduction across all in patient areas.

November 2021		December 2021		January 2022	
RN day	76%	RN day	79%	RN day	69%
RN Night	79%	RN Night	76%	RN Night	72%
HCA Day	76%	HCA Day	79%	HCA Day	69%
HCA Night	93%	HCA Night	82%	HCA Night	77%

During January 2022 there have been 38 datix staffing incidents reported. Of these 28 are recorded as no harm, 7 as low harm and 3 as moderate harm. This is at the time of the incidents being reported. Where harm is cited this is where there has been a delay in care, treatment or medication administration, where an area has higher acuity than the skill mix available to deliver care and when nurses have been unable to take a break. There are also 5 reports where a ward has been working with 1 registered nurse in order to support an area of higher complexity or acuity to meet patient need.

The Quality and Trigger tool continues to take place across the areas with 184 audits completed in January. The responses correspond with the data available above with 74% of areas reporting having the minimum number of staff available.

The winter planning guidance has been utilised for the trust in supporting the decision making process and oversight of senior nurses. The process to ensure safe staffing and mitigations in place can be seen in the risk assessment; there is evidence of effective escalation where areas require additional support and action taken. As part of the multiple daily meetings and decisions taking around staffing work has taken place in January and February to improve the documentation of these steps. The Safe care tool continues to be utilised with a 'RAG' electronic document and SBAR to capture the decision making and moves made, this is a very fluid process.

For the document in appendix D:

Planning

Detailed surge and super surge plans are in place for critical care, maternity and paediatrics which were

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developed in partnership with the appropriate clinical networks.

Updated adult acute surge capacity plans agreed and submitted to region. Staffing templates agreed for these areas with Chief Nurse.

Ward establishment review recently completed therefore assurance baseline ward templates are correct, this has been reviewed and refreshed with improved knowledge of the Omicron Variant.

Redeployment plans were put in place to respond to staff absence including redeployment hub to maximise staff support. Support and oversight provided from Chief Nurse team, Risk and Governance and Education team to provide additional nursing support.

Generic role descriptor developed for support role for inpatient wards and shared with redeployment team.

Regular review of bank incentives to ensure supply of temporary staff meets demand.

QIA for safe staffing templates completed and risk assessment in place.

Structure and Process

Operational planning meetings attendance from senior nursing to ensure alignment of capacity plans, safe staffing including detailed decision making on elective activity.

Daily staffing huddles have increased to 3 times a day 7 days a week with each one led by an Associate Director of Nursing (ADN) or deputy

Use of Safecare to guide all actions and mitigations which are documented on staffing record sheets.

Datix completed for when any area falls below agreed minimum template or red flag.

Staff raise immediate issues with site team and matrons and complete Datix as record of concerns raised. All Datix's relating to staffing are reviewed daily by ADN.

Incident management – the Trust continues working in collaboration to prioritise investigations and maximise learning from cluster reviews with the Quality team.

Quality and safety trigger tool continues to be in place with regular review.

Agency induction checklist and safety huddle sheets updated and in use.

Use of 'Check in' and 'check out' by shift co-ordinators of teams is being encouraged.

A daily rota of available Professional Nurse Advocates (PNAs) will be developed as PNAs complete the programme.

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Continued promotion of well-being Wednesday communications and resources / support available.

Monthly ward manager calls with Chief Nurse with Q&A session, increased to weekly. Weekly senior nursing meetings.

Freedom 2 Speak Up guardians continue to be available.

Governance

Forecast and actual staffing risks are reviewed and escalated and patient placement meetings attended by ADN's to ensure operational and strategic decisions on capacity are made within the context of safe staffing

Staffing concerns and risks are raised on system calls with agreements in place for mutual aid for staff or to reduce impact of staffing if required.

Health roster and Safecare are used to map staffing and patient acuity and dependency on a shift by shift basis and a daily 'forward view' for the nursing senior leadership team to highlight hotspots and enable mitigation to be put in place.

Staff absence reviewed daily.

Staffing risks are discussed with CCG, ICS, NHSE/I, CQC and system Quality Oversight meetings.

Board Oversight and Assurance

As part of the return to usual practice the Safe Staffing paper is presented to People Academy bi-monthly and includes details on staffing hotspots and triangulation of staffing fill rates with red flags and safety concerns. The committee are informed of any changes to the operational processes and oversight that are introduced in response to surge or high sickness/absence.

The Safe Staffing paper is additionally presented to Quality and Patient Safety Academy.

The strategic risk register is shared with the Board and includes risk for safe staffing. Additionally there are risks held at Care Group and Clinical Business Unit level for paediatrics, maternity and ED.

The full BAF is attached in appendix C.

Recommendation

The Board of Directors is asked to note the actions that have been taken to provide assurance on the

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provision of safe nursing and midwifery staffing during winter 21/22 which are in line with the recommended actions detailed by NHE in November 2021.

Recommendation to continue all the above intervention to support nurse staffing. This remains under constant review with the clinical areas and the feedback received by patients and the clinical teams.

- Safecare® and associated escalation/regular senior nursing oversight.
- Existing governance structure and continued encouragement to report and escalate.
- Wellbeing support.
- Quality and safety tool and escalation processes.

Risk assessment						
Strategic Objective	Appetite (G)					
	Avoid	Minimal	Cautious	Open	Seek	Mature
To provide outstanding care for patients			g			
To deliver our financial plan and key performance targets			g			
To be in the top 20% of NHS employers					g	
To be a continually learning organisation				g		
To collaborate effectively with local and regional partners					g	
The level of risk against each objective should be indicated. Where more than one option is available the level of risk of each option against each element should be indicated by numbering each option and showing numbers in the boxes.	Low		Moderate	High	Significant	
	Risk (*)					
Explanation of variance from Board of Directors Agreed General risk appetite (G)						

Benchmarking implications (see section 4 for details)	Yes	No	N/A
Is there Model Hospital data relevant to the content of this paper?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is there any other national benchmarking data relevant to the content of this paper?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is the Trust an outlier (positive or negative) for any benchmarking data relevant to the content of this paper?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Risk Implications (see section 5 for details)	Yes	No
Corporate Risk register and/or Board Assurance Framework Amendments	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Quality implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Resource implications	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Legal/regulatory implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Diversity and Inclusion implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Performance Implications	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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Regulation, Legislation and Compliance relevance
NHS Improvement: (please tick those that are relevant)
<input type="checkbox"/> Risk Assessment Framework <input type="checkbox"/> Quality Governance Framework <input type="checkbox"/> Code of Governance <input type="checkbox"/> Annual Reporting Manual
Care Quality Commission Domain: Safe
Care Quality Commission Fundamental Standard: Staffing
NHS Improvement Effective Use of Resources: Clinical Services
Other (please state):

Relevance to other Board of Director's academies: (please select all that apply)			
People	Quality	Finance & Performance	Other (please state)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Appendices

Appendix A – Risk assessment ID 271038 safe staffing January 2022
 Appendix B – Quality Impact Assessment (QIA) safe Staffing January 2022
 Appendix C - Assurance Framework – Nursing and Midwifery Staffing levels
 Appendix D – NHS England Publication PAR 1068-Winter 2021 Preparedness: Nursing and midwifery staffing