Clinical

Safe Staffing Policy

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<td>Author/Title:</td>
<td>Tim Devanney – Safe Staffing Lead</td>
</tr>
<tr>
<td>Owner/Title:</td>
<td>Kenny Laing – Deputy Director of Nursing</td>
</tr>
<tr>
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Change Control – Amendment History

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1. Introduction

Nursing, midwifery and care staff, working as part of wider multidisciplinary teams, play a critical role in securing high quality care and excellent outcomes for patients. There are established and evidenced links between patient outcomes and whether organisations have the right people, with the right skills, in the right place at the right time. The National Nursing Strategy ‘Compassion in Practice’ emphasised the importance of getting this right, and the publication of the report of the Mid-Staffordshire NHS Foundation Trust Public Inquiry and reviews by Professor Sir Bruce Keogh into 14 trusts with elevated mortality rates, Don Berwick’s review into patient safety, also highlighted the risks to patients of not taking this issue seriously.

South Staffordshire & Shropshire Healthcare NHS Foundation Trust (The Trust) is committed to ensuring that service users receive the highest quality care whilst in receipt of services. To ensure that this is achievable there must be sufficient numbers of staff who have the right levels of skills and training who can be deployed responsively to meet service user needs.

We take the care of our service users very seriously and already have a number of mechanisms in place to ensure that our wards are safely staffed, including displaying boards for patients and visitors in all of our wards that shows the planned and actual staffing available at the start of every shift.

Following a requirement from the NHS Chief Nursing Officer England and the Care Quality Commission, from June 2014 all hospitals are required to publish information about the number of nursing and midwifery staff working on each ward, together with the percentage of shifts meeting safe staffing guidelines. This initiative is part of the NHS response to the Francis report which called for greater openness and transparency in the health service.

Each month, the Trust publishes information about our staffing levels and provides links to papers discussed in public at our Trust Board meetings. As from September 2015 the board publishes safe staffing data as a combined workforce assurance and safe staffing report which can be found in the Board papers under ‘Assurance’.

2. Purpose

The purpose of this policy and associated SOP’s is to provide clear guidance on the expectations of the Trust of the standards expected to maintain safe and sustainable staffing levels in all our clinical services. This includes when and how clinical services review their budgeted establishments to ensure their staffing levels meet the needs of our service users and their families/ carer’s. It will also set out steps to be taken on our ward areas where staffing levels are not adequate and escalation is required to ensure clear decisions are taken to keep service users and staff safe.

3. Scope

This policy and SOP’s are applicable to all staff providing clinical services.. There are particular responsibilities contained in this Policy and SOP's for the following:
Director of Nursing/ Chief Operating Officer

- Is accountable for ensuring that review of establishments are reviewed as set out in the NQB guidance
- Is responsible for presenting the findings of establishment reviews to the Trust Board on a six monthly basis
- Is accountable for ensuring that staffing levels are adequate to meet the needs of patients on each shift

Deputy Director of Nursing

- Is responsible for ensuring there is a process in place to support the review of clinical team’s establishments as detailed in this SOP and in Trust policy.
- Is responsible for authoring the 6 monthly board report and ensuring the content is reflective of establishment reviews which have taken place.
- Is responsible for ensuring that there are processes in place to maintain appropriate safety and quality for patients

Heads of Service/ Matrons/ Locality Managers

- Are responsible for ensuring that establishment reviews have sufficient senior managerial and clinical oversight to validate the findings and implement changes as required.
- Are responsible for ensuring that human resources are deployed flexibly to meet patients needs as required in support of ward managers and team leaders

Ward Managers/ Team Leaders

- Are responsible for ensuring that establishment reviews are undertaken in keeping with the standards and timelines as described within this document.
- Are responsible for coordinating the review process for their clinical area of responsibility and to ensure that anyone who has a delegated role within the review is clear about their responsibilities and is competent to undertake the role.
- Are responsible and accountable for the day to day monitoring and deployment of staff within their clinical area to meet patients’ needs

All clinical staff

- Have a responsibility to contribute to the review of establishments, providing clear rationale for their input
• Are responsible for working flexibly to meet patients’ needs and for raising any safety issues which may arise from staffing levels

4. Safe Staffing Principles

The Trust has an expectation that staffing levels are maintained at levels which can support safe and effective patient care. The following principles support this expectation:

• The safety and well-being of patients is paramount and the Trust requires staff to work flexibly to meet these needs, within their scope of professional practice.
• All staff should ensure that they use the Trust e-rostering system to enable the safe and efficient use of human resource to meet patients’ needs.
• Staffing levels will be reviewed on a minimum of shift-by-shift basis which will be undertaken by ward managers and/or site managers to ensure safety and effectiveness.
• Where concerns about safe staffing are made operational managers have a duty to investigate, respond and resolve to maintain safety and provide feedback to those raising concerns.

5. Process for Monitoring Compliance and Effectiveness

The process for reviewing the effectiveness of this policy will be via the reviewing and consultation process associated with policies. Additionally, the compliance with monitoring compliance is set out in the SOP's.

6. References

Department of Health (2014) Hard Truths The Journey to Putting Patients First; Online: 05.03.15

Frances R (2013) Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry, Online: 05.03.15
http://www.midstaffspublicinquiry.com/report

National Quality Board (2013) 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. NHS England. Online: 05.03.15


Royal College of Nursing (2010) Guidance on safe nurse staffing levels in the UK, RCN Online: 05.03.15

Mental Health and learning Disability inpatient and community Staffing tools